

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001508

FILED
Apr 29, 2009
Secretary of State

Entity Name: RAJASTHAN ASSOCIATION OF NORTH AMERICA, INC.

Current Principal Place of Business:

1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 11-3512043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUPTA, VIJAY K
1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MEHTA, K.K. MBA,CPA
Address: 42 BRISTOL DR.
City-St-Zip: NORTH HILLS, NY 11030

Title: VC (X) Delete
Name: SHAH, NAVEEN C
Address: BRIDAL PATH COURT
City-St-Zip: MUTTONTOWN, NY 11595

Title: D (X) Delete
Name: ARYA, VIJAY
Address: 35 SUNSET RD. SOUTH
City-St-Zip: SEARINGTON, NY 11507

Title: D (X) Delete
Name: LODHA, AJAY
Address: 7 OAKRIDGE LN.
City-St-Zip: ROSLYN, NY 11576

Title: PST () Delete
Name: GUPTA, V. JAY K
Address: 1309 MIDDLE RIVER DR
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP () Delete
Name: GUPTA, ASHA
Address: 1309 MIDDLE RIVER DR
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: MEHTA, K.K. MBA,CPA
Address: 42 BRISTOL DR.
City-St-Zip: NORTH HILLS, NY 11030

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
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Name:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIJAY K. GUPTA

PST

04/29/2009

Electronic Signature of Signing Officer or Director

Date