

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001299

Entity Name: ASHA FOR EDUCATION INC.

FILED
Jan 11, 2009
Secretary of State

Current Principal Place of Business:

1510 COLONY DRIVE
ROCHESTER HILLS, MI 48307

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 322
NEW YORK, NY 10040322

New Mailing Address:

FEI Number: 77-0459884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMAR, ARVIND
2153 HAWTHORNE ROAD
SUITE 128
GAINESVILLE, FL 32608 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RAGHAVAN, ANAND
Address: 435 WARREN DRIVE #4
City-St-Zip: SAN FRANCISCO, CA 94131

Title: D () Delete
Name: PLAKAL, MANOJ
Address: 862 JACKSON ALLEY
City-St-Zip: MT. VIEW, CA 94043

Title: P () Delete
Name: RAVAL, NETIKA
Address: 1017 EL CAMINO REAL #292
City-St-Zip: REDWOOD CITY, CA 96063

Title: V () Delete
Name: KALRA, SAMEER
Address: 127-2A WINDING WOOD DRIVE
City-St-Zip: SAYREVILLE, NJ 08872

Title: S () Delete
Name: NANDAKUMAR, VIGNESH
Address: 2824 GARFIELD AVE. S #2
City-St-Zip: MINNEAPOLIS, MN 55408

Title: T () Delete
Name: KRISHNAMURTHY, AJITH
Address: 1510 COLONY DRIVE
City-St-Zip: ROCHESTER HILLS, MI 48307

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANKETH BHAT

MR.

01/11/2009

Electronic Signature of Signing Officer or Director

Date