FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
[illegible]

APPROVED
AND
FILED

95 MAY -1 AM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F23388** **(4)**

1. Corporate Name

LOKMANYA, INC.

Principal Place of Business

55 NE 2ND ST
MIAMI FL 33132

Mailing Address

55 NE 2ND ST
MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/26/1981	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2083353	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has not filed [illegible] Florida Statutes.	☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip 25 Country	29 Zip 30 Country

9. Name and Address of Current Registered Agent

BERGER, DAVID S., ESQ.
100 N. BISCAYNE BLVD., STE 1707
MIAMI FL 33132

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of sections [illegible] Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of [illegible] Florida Statutes.

SIGNATURE [illegible]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	
TITLE	V	TITLE	☐ Change ☐ Addition
NAME	DHANANI, NASRAIN	NAME	
STREET ADDRESS	1800 NE 199TH ST	STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH., FL 00000	CITY-ST-ZIP	
TITLE	P	TITLE	☐ Change ☐ Addition
NAME	DHANANI, SALIM	NAME	
STREET ADDRESS	1800 NE 199TH ST	STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH., FL 00000	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing [illegible] Florida Statutes. [illegible]

SIGNATURE: Sal Dhanani - PRESIDENT. 4/29/95 305 3717694

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR