## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002579

Intity Name: SOLITH FLODIDA TAMIL SANCAM

FILED May 26, 2009 Secretary of State

Entity Na	me: SOUTH FLORIDA TAMIL SANGAM, I	NC.		
Current Principal Place of Business:		New Princ	New Principal Place of Business:	
	NTON LANE , FL 33326			
Current Mailing Address:		New Mailir	New Mailing Address:	
	ITON LANE , FL 33326			
In accordan	: 65-1002914 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did	<del>-</del>	e. `´	
Name and	I Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
SUITE 302	36TH STREET			
	named entity submits this statement for the e of Florida.	e purpose of changing it	s registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered A	gent	Date	
OFFICER	S AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ( ) Delete RATHINAVELU, APPU 617, STANTON LANE WESTON, FL 33326	Title; Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Delete NARAYANAN, RADHA 1975 NW 167TH AVE PEMBROKE PINES, FL 33028	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition RAMASAMY, SRIDEVI 401 NW 23RD STREET BOCA RATON, FL 33431	
Title: Name: Address: City-St-Zip:	JSD ( ) Delete RAMALINGAM, LALITHA 16461 NW 16TH ST PEMBROKE PINES, FL 33028	Title: Name: Address: City-St-Zip:	JSD (X) Change ( ) Addition SELVAN, VANITHA 920 NW, 96 AVENUE PLANTATION, FL 33324	
Title: Name: Address: City-St-Zip:	SD ( ) Delete PARTHASARATHY, GOKUL 11230 MISTY RIDGE WAY BOYANTON BEACH, FL 33473	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	TD () Delete KALAICHEZHIAN, SIVAPRAKASAM	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: APPU RATHINAVELU PD 05/26/2009

8850 WEST FLAGLER ST, #1

MIAMI, FL 33174

Address:

City-St-Zip: