

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005342

FILED  
Feb 20, 2007  
Secretary of State

Entity Name: VISHNU MANDIR, INC.

## Current Principal Place of Business:

5803 LYNN RD.  
TAMPA, FL 33624

## New Principal Place of Business:

## Current Mailing Address:

3052 7TH AVE N  
SAINT PETERSBURG, FL 33713

## New Mailing Address:

FEI Number: 82-0553790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHARMA, SEWNARINE  
5803 LYNN RD.  
TAMPA, FL 33624 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: P ( ) Delete  
Name: SINGH, SHANTIA  
Address: 3052 7TH AVE.  
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: VP ( ) Delete  
Name: PARIMAL, BUTALA  
Address: 1307 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33604

Title: S ( ) Delete  
Name: DINDIAL, SONN L  
Address: 5549 24TH AVE N.  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T ( ) Delete  
Name: NARIE, PERSAD  
Address: 2801 LACOUCHA DR.  
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete  
Name: PATEL, PRATIV  
Address: 3312 LITHIA PINECREST RD  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: MADHO, JAIMANGAL  
Address: 3301 3RD AVE N.  
City-St-Zip: SAINT PETERSBURG, FL 33713

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: PARIMAL, BUTALA  
Address: 1307 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33604

Title: S (X) Change ( ) Addition  
Name: DINDIAL, SONNYLAL  
Address: 5549 24TH AVE N.  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ( ) Change ( ) Addition  
Name:  
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 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: SHANTIA SINGH

P

02/20/2007

Electronic Signature of Signing Officer or Director

Date