## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000005342

Entity Name: VISHNU MANDIR, INC.

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
5803 LYNN RD. TAMPA, FL 33624				
Current Ma	ailing Address:	New Mailing Addres	New Mailing Address:	
3052 7TH AVE N SAINT PETERSBURG, FL 33713			3052 7TH. AVENUE NORTH ST. PETERSBURG, FL 33713, US	
FEI Number:	82-0553790 FEI Number Applied For ( ) FI	El Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
SHARMA, \$ 5803 LYNN TAMPA, FL		SINGH, SHANTIA 3052 7TH. AVENUE N S. PETERSBURG, FL		
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.				
SIGNATUR	E: SHANTIA SINGH		03/18/2008	
Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) Delete SINGH, SHANTIA 3052 7TH AVE. SAINT PETERSBURG, FL 33713	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete PARIMAL, BUTALA 1307 E. HILLSBOROUGH AVE. TAMPA, FL 33604	Address: 2537 ROY	(X) Change ( ) Addition , OMARDEO HANNA DRIVE S SBURG, FL 33712	
Title: Name: Address: City-St-Zip:	S () Delete DINDIAL, SONNYLAL 5549 24TH AVE N. SAINT PETERSBURG, FL 33710	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete NARIE, PERSAD 2801 LACOUCHA DR. CLEARWATER, FL 33762	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete PATEL, PRATIV 3312 LITHIA PINECREST RD VALRICO, FL 33594	Title: Name: Address: City-St-Zip:	() 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SHANTIA SINGH P/D 03/18/2008

( ) Delete

SAINT PETERSBURG, FL 33713

MADHO, JAIMANGAL

3301 3RD AVE N.

Name:

Address:

City-St-Zip:

() Change () Addition