

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006097

Entity Name: ANANDADHARA INC.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

2318 SAINT CROIX STREET  
KISSIMMEE, FL 34741

## New Principal Place of Business:

## Current Mailing Address:

2318 SAINT CROIX STREET  
KISSIMMEE, FL 34741

## New Mailing Address:

FEI Number: 54-2069309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUSTAFA, SHAWON  
2318 SAINT CROIX STREET  
KISSIMMEE, FL 34741 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: D ( ) Delete  
Name: HOSSAIN, TOFAZZAL  
Address: 486 CIDER MILL PL  
City-St-Zip: LAKE MARY, FL 32746 US

Title: D ( ) Delete  
Name: MUSTAFA, SHAWON  
Address: 2318 SAINT CROIX ST  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: D ( ) Delete  
Name: HOSSAIN, MD (ANANDA) I  
Address: 8313 DOT LANE  
City-St-Zip: ORLANDO, FL 32809 US

Title: D ( ) Delete  
Name: ARFAN, SHAIKH  
Address: 5512 ARNOLD PALMER DR APT 1326  
City-St-Zip: ORLNADO, FL 32811 US

Title: D ( ) Delete  
Name: CHOUDHURY, HASAN T  
Address: 1278 EPSON OAKS WAY  
City-St-Zip: ORLANDO, FL 32837 US

Title: D ( ) Delete  
Name: RAHMAN, SHABBIR W  
Address: 1737 GOLF VIEW DR  
City-St-Zip: KISSIMMEE, FL 34746 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HOSSAIN, MD (ANADA) I  
Address: 8313 DOT LANE  
City-St-Zip: ORLANDO, FL 32837 US

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

Title: D (X) Change ( ) Addition  
Name: ADHIKARY, SHAPON  
Address: 2350 MONT CLAIR RD  
City-St-Zip: LEESBURG, FL 34748 US

Title: D (X) Change ( ) Addition  
Name: ARFAN, SHAIKH  
Address: 4539 CAMBIUM CT  
City-St-Zip: ORLNADO, FL 32810 US

Title: D (X) Change ( ) Addition  
Name: RAHMAN, SHABBIR W  
Address: 1737 GOLFVIEW DR  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: D (X) Change ( ) Addition  
Name: HOSSAIN, TOFAZZAL  
Address: 240 MAGNOLIA PARK TRAIL  
City-St-Zip: SANFORD, FL 32773 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHAWON MUSTAFA

D

04/30/2005

Electronic Signature of Signing Officer or Director

Date