**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # N02308**

1. Corporation Name

KERALA SAMAJAM OF SOUTH FLORIDA INC.

Principal Place of Business 4865 N.W. 101 AVENUE CORAL SPRINGS FL 33076

Oringinal Diseases Rusiness

Mailing Address

2a Mailing Address

4865 N.W. 101 AVENUE CORAL SPRINGS FL 33076

## **FILED** May 13, 2000 8:00 am Secretary of State

05-13-2000 90047 008 \*\*\*\*61.25

UUU49241

3 Date Incorporated or Qualifed



i Filincipai F	race of publifiess	26 Walling Address		04/02/1984	•	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For	
	,	27 -		65-0153874	Not Applicable	
City & Stat	e	City & State		5. Certificate of Status Desired	\$8.75 Additional	
.! 28				5. Certificate of Status Desired	Fee Required	
Zip	Country	Zip C	Country	6. Election Campaign Financing	\$5.00 May Be	
.!	25	29 30		Trust Fund Contribution	Added to Fees	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
			81 Name	Georgy Varughes	e .	
CHACKO, JOSEPH			82 Street Address (P.O. Box Number is Not Acceptable)			
4885 N.W. 101 AVENUE			521 Carrinaton Lane			
CORAL SPRINGS FL 33076			83			
			84 City		85 Zip Code	
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	veston <u>FL</u>	- 33324	
1. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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, Section 617.0503, Florida Statutes.						
SIGNATURE Sky lde, Georgy Grugher 4/20/00						
•	Signature, typed or printed name of registered agent a		ered Agent signature req			
2.	OFFICERS AND		<del> 3.</del>	ADDITIONS/CHANGES TO OFFICERS AI		
IITE	P S S S S S S S S S S S S S S S S S S S	• • •	1 TITLE	President	Change	
_	CHACKO, JOSEPH		2 NAME	Varughese, Georgy		
····_ / ADDRESS	4865 N.W. 101 AVENUE	e ta	3 STREET ADDRESS	521 Carrington Lar	12 ·	
ST ZIP	CORAL SPRINGS FL 33076		4 C/TY-ST-ZIP	Westma FL 33326	• -	
	V		1 TITLE	1/	Change	
	KUNCHANDI, MANILAL	2.3	2 NAME	Chacko, Joseph		
	7440 N.W. 24 STREET	2:	3 STREET ADDRESS	4865 NW 101 AVE 330	76	
ST-ZIP	CORAL SPRINGS FL 33063		4 CITY-ST-ZIP	Coral Springs . Fz . 330		
	S	DELETE 3.	1TTLE ~	Secretary	Change	
İ	VARYGHESE, GEORGY	3.2	2 NAME	Chilampath, Binu		
···· I ADDRESS	521 CARINGTON LANE	3.3	3 STREET ADDRESS	5684 SW 114 Ave.	33330	
ST-ZIP	WESTON FL 33326		4. CITY-ST-ZIP	Cooper City. FL:		
	T	DELETE 4.	1 TITLE	TIdiculla, Rajumon	Addition Addition	
-	KALAYIL, JACOB	4.	2 NAME	17033 NW 15 St		
··· I ALIURESS	5364 N.W. 66TH AVENUE	4.3	3 STREET ADDRESS			
ST ZIP	CORAL SPRINGS FL 33067		4 CITY-ST-ZIP	Davle, F2. 33028.	·	
	D	<i>,</i> ,	t TITLE	D THAT And MATE	Change Addition	
	IDICULLA, LIBBY		,	D. THOTTAM, MATH	$e\omega$ .	
: AUUHESS	17033 N.W. 15 STREET	I	3 STREET ADDRESS	5932. TRIPHAMMER.	Kal	
ST 210	DAVIE FL		4 CITY-ST-ZIP	LAKE WORTH FC 3.	3463	
	D	Specie	1 IIILE	GEORGE, RAJAN	Par Change   LAddition	
l	BERNARD, JOHN		2 NAME	y Gun Kar / Kar Mu	KUTTY	
: ADDRESS	14401 S.W. 97 AVENUE		3 STREET ADORESS	1073 SEQUOTA L		
ST ZIP	KENDAL MIAMI-FL 33176	6.4	4 CITY-ST-ZIP	WESTON, FL 33 &	<u> </u>	
**ET ZIP KENDAL MIAMI-FL 33176  64 CITY-ST-ZIP WS-TON, FL 33 27.  I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fibrida Statutes. I further certify that the information indicated on this applied report or supplemental angular point; that I am an applied to this applied report or supplemental angular point; that I am an applied to this applied report or supplemental angular point; that I am an applied to this applied report or supplemental angular point; that I am an applied to the same lend of						

indicated on trils annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am at 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 in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.