## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000365

FILED Apr 10, 2007 Secretary of State

Entity Name: SOIKOT - BENGALI ASSOCIATION OF GREATER TAMPA, INC.

**Current Principal Place of Business: New Principal Place of Business:** C/O RABI GHOSHDASTIDAR 16206 ASHLEY PARK PLACE TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 16206 ASHLEY PARK PLACE 8134 BRINEGAR CIRCLE TAMPA, FL 33647 TAMPA, FL 33647 FEI Number: 20-0885156 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GHOSHDASTIDAR, RABI 16206 ASHLEY PARK PLACE TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition SARKER, RAJA CHOUDHURI, SUJOY Name: Name: 13009 ROYAL GEORGE AVE Address: 1217 NASHVILLE DR. Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: WESLEY CHAPPEL, FL 33543 US Title: ( ) Delete Title: () Change () Addition LAHIRI, MANOJ Name: Name: Address: 1738 HULETT DRIVE Address: City-St-Zip: BRNADON, FL 33511 US City-St-Zip: Title: () Delete Title: () Change () Addition SARKAR, JYOTIRMOY Name: Name: 6142 LANSHIRE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33634 US City-St-Zip: (X) Change ( ) Addition Title: ( ) Delete Title: GHOSHDASTIDAR, RABI Name: Name: GHOSHDASTIDAR, RABI 16206 ASHLEY PARK PLACE 8134 BRINEGAR CIRCLE Address: Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: TAMPA, FL 33647 US Title: ( ) Delete Title: () Change () Addition MUKHERJEE, JOYDEEP Name: Name: 406 WINGATE CIRCLE Address: Address: City-St-Zip: OLDSMAR, FL 34677 US City-St-Zip: Title: () Delete Title: () Change () Addition CHAKRABORTI, ANIRBAN Name: Name: Address: 12708 BRUCE B. DOWNS BLVD, APT#222 Address: **TAMPA, FL 33612 US** City-St-Zip: 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: RABI GHOSHDASTIDAR D 04/10/2007