

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000823

FILED
Mar 13, 2005
Secretary of State

Entity Name: INDO-AMERICAN PHARMACISTS ASSOCIATION OF TAMPA BAY, INC.

Current Principal Place of Business:

1408 N. WESTSHORE BLVD.
SUITE 611
TAMPA, FL 33607

New Principal Place of Business:

1195 GASPARILLA DRIVE NE
ST PETERSBURG, FL 33702

Current Mailing Address:

1408 N. WESTSHORE BLVD.
SUITE 611
TAMPA, FL 33607

New Mailing Address:

1195 GASPARILLA DRIVE NE
ST PETERSBURG, FL 33702

FEI Number: 11-3675332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

SHAH, LINDA
1195 GASPARILLA DRIVE NE
ST PETERSBURG, FL 33702 US

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: LINDA SHAH

03/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PATEL, RAJESH
Address: 1408 N. WESTSHORE BLVD. SUITE 611
City-St-Zip: TAMPA, FL 33607

Title: SD () Delete
Name: MATHARU, MAJIT
Address: 1408 N. WESTSHORE BLVD. SUITE 611
City-St-Zip: TAMPA, FL 33607

Title: TD () Delete
Name: SHUKLA, PARESH
Address: 1408 N. WESTSHORE BLVD. SUITE 611
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHAH, LINDA
Address: 1195 GASPARILLA DRIVE NE
City-St-Zip: ST PETERSBURG, FL 33702

Title: SD (X) Change () Addition
Name: PATEL, NILA
Address: 17201 KEELY DRIVE
City-St-Zip: TAMPA, FL 33647

Title: TD (X) Change () Addition
Name: PATEL, PREETI
Address: 19004 AVENUE BAYONNES
City-St-Zip: LUTZ, FL 33558

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: LINDA SHAH

PD

03/13/2005

Electronic Signature of Signing Officer or Director

Date