

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006820

FILED
Apr 09, 2012
Secretary of State

Entity Name: SHRI SARASWATI DEVI MANDIR INC.

Current Principal Place of Business:

16220 LIVINGSTON AVE
LUTZ, FL 33559

New Principal Place of Business:

Current Mailing Address:

NARINE RAMLAL
8306 NORTH ROME AVE
TAMPA, FLORIDA, FL 33604

New Mailing Address:

16019 GLEN HAVEN DR
TAMPA, FL 33618

FEI Number: 27-0065183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARINE, RAMLAL
8306 N. ROME AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

JAGMOHAN, BURT
16019 GLEN HAVEN DR
TAMPA, FL 33618 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: BURT JAGMOHAN

04/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMPERTAAP, MOONASAR
Address: 6170 9TH AVE CR NE
City-St-Zip: BRADENTON, FL 34212

Title: S
Name: PERSAUD, JANGBAHADOOR
Address: 1450 WILKINSON DR
City-St-Zip: PLANT CITY, FL 33566

Title: T
Name: JAGMOHAN, BURT
Address: 16019 GLEN HAVEN DR
City-St-Zip: TAMPA, FL 33618

Title: BM
Name: KOBIR, MOHANLAL DR
Address: 6445 17TH WAY N
City-St-Zip: ST PETERSBURG, FL 33709

Title: BM
Name: SHARMA, DAVE P
Address: 30927 BRIDGEGATE DR
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: BM
Name: MARAJ, KHEMRAJ
Address: 10622 BAMBOO ROD CR
City-St-Zip: RIVERVIEW, FL 33569

I hereby 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 all other like empowered.

SIGNATURE: BURT JAGMOHAN

T

04/09/2012

Electronic Signature of Signing Officer or Director

Date