

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003984

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: TRI BHUWAN SHAKTI MANDIR, INC.

## Current Principal Place of Business:

1600 PARK MANOR DR.  
ORLANDO, FL 32825

## New Principal Place of Business:

## Current Mailing Address:

1600 PARK MANOR DR.  
ORLANDO, FL 32825

## New Mailing Address:

FEI Number: 20-1029946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUPAN, ANJANIEE  
4901 SUDBURY CT.  
ORLANDO, FL 32826 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: T ( ) Delete  
Name: RUPAN, ANJANIEE  
Address: 4901 SUDBURY CT.  
City-St-Zip: ORLANDO, FL 32826

Title: T ( ) Delete  
Name: GANESH, KAISRIE  
Address: 3919 DALLAS BLVD.  
City-St-Zip: ORLANDO, FL 32833

Title: T ( ) Delete  
Name: SATNARINE, JAYONTEE  
Address: 13231 MEDOWLAK LANE  
City-St-Zip: ORLANDO, FL 32828

Title: T (X) Delete  
Name: LATCHMAN, KRISHNA  
Address: 12303 E. COVE DR.  
City-St-Zip: ORLANDO, FL 32826

Title: D (X) Delete  
Name: OODHICAN, PADMATIE  
Address: 2874 N. PINE HILLS RD.#143  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: RUPAN, ANJANIEE  
Address: 1600 PARK MANOR DR.  
City-St-Zip: ORLANDO, FL 32825

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

Title: D (X) Change ( ) Addition  
Name: SATNARINE, JAYONTEE  
Address: 13231 MEDOWLAK LANE  
City-St-Zip: ORLANDO, FL 32828

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ANJANIEE RUPAN

S

04/10/2007

Electronic Signature of Signing Officer or Director

Date