

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009984

FILED
Sep 01, 2006
Secretary of State

Entity Name: INDIA UNITED, INC.

Current Principal Place of Business:

2633 LANTANA ROAD STE 18
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

2633 LANTANA ROAD STE 18
LANTANA, FL 33462

New Mailing Address:

FEI Number: 06-1763837 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOHAN, AKSHAY
2633 LANTANA ROAD STE 18
LANTANA, FL 33462 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: PD () Delete
Name: RANGAM, KRISHNA
Address: 5817 MARGATE BLVD
City-St-Zip: MARGATE, FL 33063

Title: SD () Delete
Name: MOHAN, AKSHAY
Address: 2633 LANTANA ROAD STE 18
City-St-Zip: LANTANA, FL 33462

Title: PD () Delete
Name: THADANI, RAJESH
Address: 8829 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322

Title: TD () Delete
Name: NERLEKAR, ROHIT
Address: 4760 W 8 LANE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: AKSHAY MOHAN

OFFI

09/01/2006

Electronic Signature of Signing Officer or Director

Date