

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010202

FILED
Apr 30, 2008
Secretary of State

Entity Name: BHAWAANI MANDIR INC.

Current Principal Place of Business:

680 SW COLLEEN AVE
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

680 SW COLLEEN AVE
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 26-1289162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHARAJ, PETER
2711 VISTA PARKWAY
2
WEST PALM BEACH, FL 33411 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: P () Delete
Name: DOOKRAN, DEOCHAN
Address: 3590 NW ADRIATIC LN
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: VP () Delete
Name: KETWAROO, KESHWAR
Address: 1541 SW FORTUNE RD
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: VP () Delete
Name: HUSSMAN, WAHID
Address: 486 NW READING LN
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: SEC () Delete
Name: MANSOOK, SHAMDAI
Address: 1541 SW FORTUNE RD
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: A SE () Delete
Name: HUSSMAN, MAUREEN
Address: 486 NW READING LN
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: TREA () Delete
Name: BISSOON, PUNDERAI
Address: 501 SW FREDRICA ST
City-St-Zip: PORT ST. LUCIE, FL 34983 US

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:

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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 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: PUNDERAI BISSOON

TREA

04/30/2008

Electronic Signature of Signing Officer or Director

Date