2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09066

FILED Feb 03, 2005 Secretary of State

Entity Name: INDIA FINE ARTS SOCIETY, INC.

Current Principal Place of Business:

C/O DR. R. IYENGAR 10000 W. BROADVIEW DR BAY HARBOR ISLS, FL 33154 US	C/O DR. R. IYENGAR 631 ENCLAVE CIRCLE EAST PEMBROKE PINES, FL 33027 US
Current Mailing Address:	New Mailing Address:
C/O DR. R. IYENGAR 10000 W. BRODVIEW DR BAY HARBOR ISLS, FL 33154 US	C/O DR. R. IYENGAR 631 ENCLAVE CIRCLE EAST PEMBROKE PINES, FL 33027 US
FEI Number: 65-0168758 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
IYENGAR, RAMANUJA 10000 WEST BROADVIEW DRIVE BAY HARBOR ISLAND, FL 33154 US	IYENGAR, RAMANUJA 631 ENCLAVE CIRCLE EAST PEMBROKE PINES, FL 33027 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:	02/03/2005
Electronic Signature of Registered Agent	Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

() Delete (X) Change () Addition IYENGAR, RAMANUJA, IYENGAR, RAMANUJA, Name: Name: Address: 10000 W. BROADVIEW DR. Address: 631 ENCLAVE CIRCLE EAST City-St-Zip: GAY HARBOR ISLE, FL 33154 City-St-Zip: PEMBROKE PINES, FL 33027 Title: PD Title: () Change () Addition () Delete Name: AAJI, ANU Name: Address: 8530 DUNDEE TERR Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition NARASIMHAN, RAMARATHNAM Name: Name: 12421 SW 104TH TERR Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: () Delete Title: Title: TD () Change () Addition Name: NARASIMHAN, YANGCHEN Name: 12421 SW 104TH TERR. Address: Address: City-St-Zip: MIAMI, FL City-St-Zip:

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: RAMANUJA IYENGAR D 02/03/2005