

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**May 03, 1999 8:00 am**  
**Secretary of State**

05-03-1999 90126 043 \*\*\*\*\*8.75

05-03-1999 90126 044 \*\*\*\*\*61.25

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N38465**

1. Corporation Name

**HINDU SOCIETY OF AMERICA, INC.**

Principal Place of Business

11120 SW 174 TERRACE  
MIAMI FL 33157  
US

Mailing Address

11165 S W 138TH ST  
11165 SW 138 STREET  
MIAMI FL 33176  
US



2. Principal Place of Business

21 **4851 SW 108 STREET**

Suite, Apt. #, etc.

22

City & State

23 **MIAMI, FLORIDA**

Zip

24 **33157**

Country

25 **U.S.A.**

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

**06/04/1990**

4. FEI Number

**65-0217411**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Election Campaign Financing



**\$5.00** May Be  
Added to Fees

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

**DOOBAY, S.P.  
11165 SW 138 STREET  
MIAMI FL 33176**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **DOOBAY, S.P.**  
STREET ADDRESS **11165 SW 138 STREET**  
CITY-ST-ZIP **MIAMI FL**

TITLE **VD** ☒ DELETE

NAME **SHRI, KAIMRAJH**  
STREET ADDRESS **12795 SW 189TH ST**  
CITY-ST-ZIP **MIAMI FL**

TITLE **TD** ☒ DELETE

NAME **PERSAUD, NARACE**  
STREET ADDRESS **8234 SW 206TH TERR**  
CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☒ DELETE

NAME **SHIVBARAN, ROHIT**  
STREET ADDRESS **8281 NW 183 ST.**  
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☒ DELETE

NAME **MAHADEO, SINGH N**  
STREET ADDRESS **10840 SW 165TH STREET**  
CITY-ST-ZIP **MIAMI FL**

TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

NAME **V.D. SIEW, ANDREW**  
STREET ADDRESS **8100 SW 178 ST.**  
CITY-ST-ZIP **MIAMI FL 33157**

3.1 TITLE ☒ Change ☐ Addition

NAME **T.D. PARSAUD, CHANDRESH**  
STREET ADDRESS **15569 SW 138 ST.**  
CITY-ST-ZIP **MIAMI FL 33177**

4.1 TITLE ☒ Change ☐ Addition

NAME **S.D. DOOBAY, BADRI**  
STREET ADDRESS **20305 SW 132 AVE**  
CITY-ST-ZIP **MIAMI FL 33177**

5.1 TITLE ☒ Change ☐ Addition

NAME **S. SINGH, JAGNARINE**  
STREET ADDRESS **11120 SW 174 TER.**  
CITY-ST-ZIP **MIAMI FL 33157**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**S. D. DOOBAY, BADRI**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/25/99**  
Date

**305-3700281**  
Daytime Phone #

CR2E037 (11/98)