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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
May 14, 1999 8:00 am  
Secretary of State

05-14-1999 90007 089 \*\*\*\*61.25

05-14-1999 90007 090 \*\*\*\*\*8.75

DOCUMENT # N40416

1. Corporation Name

SATYAKAAM SANSKRITI SABHA, INC.

Principal Place of Business

311 E PALM AVE  
TAMPA FL 33602  
US

Mailing Address

PO BOX 173241  
TAMPA FL 33672  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

3. Date Incorporated or Qualified

10/19/1990

4. FEI Number

59-3034726

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

SONNYLAL, DINDIAL B  
311 E PALM AVE  
TAMPA FL 33602

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

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 ~~SHARMA, DEWNARINE~~ ☒ DELETE  
NAME  
STREET ADDRESS 1006 PINEHAVEN CT  
CITY-ST-ZIP BRANDON FL

TITLE SD ☐ DELETE  
NAME SONNYLAL, DINDIAL B.  
STREET ADDRESS 5549 24TH AVE NORTH  
CITY-ST-ZIP ST PETERSBURG FL

TITLE TD ☐ DELETE  
NAME SINGH, SHANTIA  
STREET ADDRESS 3052 7TH AVE N  
CITY-ST-ZIP ST PETERSBURG FL

TITLE D ☐ DELETE  
NAME SENAPATI, KIRON  
STREET ADDRESS 9510 NORCHESTER CIR  
CITY-ST-ZIP TAMPA FL

TITLE ~~D. PATEL, YOGESH~~ ☐ DELETE  
NAME  
STREET ADDRESS 1006 OLD FIELD DRIVE  
CITY-ST-ZIP BRANDON, FL.

TITLE D. PATEL, YOGESH ☐ DELETE  
NAME  
STREET ADDRESS 4126 TYNDAL DRIVE  
CITY-ST-ZIP BRANDON FL 33511

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition  
1.2 NAME RATTAN, PAWAN K.  
1.3 STREET ADDRESS 26 ADALIA AVENUE  
1.4 CITY-ST-ZIP TAMPA FL 33606

2.1 TITLE TD ☐ Change ☒ Addition  
2.2 NAME PERSAD, NARIE  
2.3 STREET ADDRESS 4870 MILL RUN DRIVE  
2.4 CITY-ST-ZIP NEW PORT RICHEY FL 33653

3.1 TITLE VP ☒ Change ☐ Addition  
3.2 NAME SINGH, SHANTIA  
3.3 STREET ADDRESS 3052 - 7TH AVENUE NORTH  
3.4 CITY-ST-ZIP ST PETERSBURG, FL 33713

4.1 TITLE D ☐ Change ☒ Addition  
4.2 NAME JAIPERSHAD, RONICA  
4.3 STREET ADDRESS 9908 CHRIS CRAFT COURT  
4.4 CITY-ST-ZIP TAMPA, FL 33615

5.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME PATEL, P. D.  
5.3 STREET ADDRESS 1006 OLD FIELD DRIVE  
5.4 CITY-ST-ZIP BRANDON, FL 33511

6.1 TITLE D ☐ Change ☒ Addition  
6.2 NAME PATEL, PRATIV  
6.3 STREET ADDRESS 815 GREENWOOD COURT  
6.4 CITY-ST-ZIP BRANDON, FL 33511

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:

D. PATEL, YOGESH

4/20/99

727-345-0291

CR2E037 (11/98)