

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49198

FILED
Mar 24, 2009
Secretary of State

Entity Name: OM TAT SAT INSTITUTE OF YOGA, INC.

Current Principal Place of Business:

8514 ROSE GROVES RD
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

8514 ROSE GROVES RD
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 59-3169913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JERRYBANDAN, RAMNARINE
8514 ROSE GROVES RD
ORLANDO, FL 32818 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: JERRYBANDAN, RAMNARINE
Address: 8514 ROSE GROVES RD
City-St-Zip: ORLANDO, FL 32818

Title: V () Delete
Name: MAHABIR, NESHAN
Address: 1431 SACKETT CR
City-St-Zip: ORLANDO, FL 32818

Title: TD () Delete
Name: MAHABIR, NESHAN
Address: 1431 SACKETT CR.
City-St-Zip: ORLANDO, FL 32818

Title: S () Delete
Name: MOOTOOSAMMY, NOWELL
Address: 1610 E SPRING RIDGE CIR
City-St-Zip: WINTER GARDEN, FL 34787

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 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: NESHAN MAHABIR

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date