2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N92000000250

Entity Name: FLORIDA-NEPAL ASSOCIATION, INC.

FILED Jan 26, 2003 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
6320 NW 33RD TERRACE GAINESVILLE, FL 32606					
Current Mailing Address:			New Mailir	New Mailing Address:	
1368 MALLARD LANDING BLVD. JACKSONVILLE, FL 32259 US					
FEI Number: 59-3152163 FEI Number Applied For () FEI N			FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LAMSAL, RAJEEB K 1368 MALLARD LANDING BLVD. N. JACKSONVILLE, FL 32259 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:					
		Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DVP () De SHUKLA, SHAILEN 2018 SW 102ND T GAINESVILLE, FL	IDRA ERR 32607	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GS () De KATTEL, BIJAYA 12197 SUNSET PO WELLINGTON, FL	DINT CIRCLE	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition KATTEL, BIJAYA 12197 SUNSET POINT CIRCLE WELLINGTON, FL 33414	
Title: Name: Address: City-St-Zip:	T () De MALI, RADHA 6320 NW 33RD TE GAINESVILLE, FL	RR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () De ACHARYA, DHARM 157 SEASIDE CIR. POINTE VERDA, F	1A -	Title: Name: Address: City-St-Zip:	GS (X) Change () Addition TIWARI, KHUSI RAM 10112 TWISTING VINE CT TALLAHASSEE, FL 32312	
Title: Name: Address: City-St-Zip:	IS () De MALI, SHAILENDR 3406 VICTORIA PH JACKSONVILLE, F	A (RD	Title: Name: Address: City-St-Zip:	IS (X) Change () Addition BAJRACHARYA, SANJAY 7458 CHAMPAGNE PLACE BOCA RATON, FL 33433	
Title: Name: Address: City-St-Zip:	MAL () De UPADHYAYA, PRA 9413 CHART HOU: TAMPA, FL 33569	TIMA SE CRT	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BIJAYA KATTEL PD 01/26/2003