

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004906

FILED
Apr 27, 2006
Secretary of State

Entity Name: ARYA SAMAJ OF MIAMI, INC.

Current Principal Place of Business:

14550 SW 110 STREET
MIAMI, FL 33186 US

New Principal Place of Business:

14395 SW 139 CT
103
MIAMI, FL 33186 US

Current Mailing Address:

14550 SW 110 STREET
MIAMI, FL 33186 US

New Mailing Address:

14395 SW 139 CT
103
MIAMI, FL 33186 US

FEI Number: 65-0525281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEVILLE RAMPERSAUD
14550 SW 110 STREET
MIAMI, FL 33186 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: PD () Delete
Name: RAMPERSAUD, NEVILLE
Address: 14550 SW 110 STREET
City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete
Name: JHISIAWAN, RHARNA
Address: 14395 SW 139 CT UNIT 103
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: RAMPERSAUD, ELAINE
Address: 14550 SW 110 STREET
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: BHAGWANDIN, LALITA
Address: 14395 SW 139 CT UNIT 103
City-St-Zip: MIAMI, FL 33186

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 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: RAJ PRAKASH

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date