NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Sep 09, 2004 8:00 am Secretary of State 09-09-2004 90004 015 ****61.25

| DOCUMENT # N95000004594 | | | | | 09-09-2004 90004 015 ****61.25 | | |
|--|---|----------------------------------|---------------|-------------------------|--|----------------|-----------------|
| FOUNDATION FOR WORLD AWAKENING N. AYING | | | | | | | |
| DO NOT WRITE IN THIS SPACE | | | | | | | |
| | | | | | 54072086 | | |
| 2. Principal Place of Business 8743 HUNTFIGUD STREET 8743 HUNTFI | | | | LD 57 | | | 14000 |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | DO NOT WRITE IN THIS SPACE | | |
| City & Stat | State TAMPA FLORIDA TAMPA | | | ORIDA | 4. FEI Number 59 - 3336 774 Applied For Not Applicable | | |
| | 3635 USA 33635 | | | USA- | Certificate of Status Desired | | |
| DO NOT WRITE IN THIS SPACE | | | | Name 12 | 7. Name and Address of Current Registered Agent | | |
| | | | | K | et Address (P.O. Box Number is Not Acceptable) | | |
| | | | | 3105 | WEST | WATERS AVE | 5) Suite 105 |
| | | | | City — | MON | FL 2 | Cip Code |
| 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | |
| SEED 10 total 25 | | | | | ## Make Check Payable to | | |
| FEE IS \$61.25 9. Election Campaign Financing Finitial or Amended UBR 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Department of State | | | | | | | A 16 (A) |
| 10. OFFICERS AND DIRECTORS | | | | | | | |
| TITLE NAME | PRESIDENT Subramanian M Kumar | | | E E | | | 2/04 |
| STREET ADDRESS CITY-ST-ZIP | DRESS 8743 HUNTFIELD ST | | | ET ADDRESS - SI-ZIP | | | 378 (|
| TITLE | BHASKAR KASUKHELA | | | | = , <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | | CRZE037B (12/01 |
| NAME STREET ADDRESS | | | | E Et address | ا | | |
| CITY-ST-ZIP TITLE | SECRETARY | | | -ST-ZIP | | | |
| name Street address | BHASKAR KASUKHELA ORESS 1017 AZALGA DRIVE NORTH BRUNSWICK, NJ-08902 | | | E ET ADDRESS | | | |
| CITY-ST-ZIP | | | | · ST-ZIP | DO NOT WOITE | | |
| TITLE NAME | TREASURER PRAIMATEE MOSUDEEN | | | E E | IN THIS SPACE | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS - ST- ZIP | | | |
| TITLE | NORTH BRUNSWICE | 113-06-102 | TITLE | : | | | , |
| NAME STREET ADDRESS | | | | E Et address | | | |
| CITY-ST-ZIP TITLE | | | | -ST-ZIP | | | |
| NAME | | | TITLE NAMI | E | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS - ST- ZIP | | | |
| 12. 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 report or supplemental 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 10 or on an attachment with an address, with an other like empowered. | | | | | | | |
| SIGNATURE: 09 03 2004 (813) 679-4237 | | | | | | | |
| · | SIGNATURE AND TYPED OR PRI | INTED NAME OF SIGNING OFFICER OR | DIRECT | OR | [] | Date Daytime F | hone # |

Affachment

54072086 # N95000004595

Subramanian M Kumar
Foundation for World Awakening N.A, Inc.
8743 Huntfield Street

Tampa FL-33635

Subject: UBR Filing

Dear Sir,

I have been trying since the evening of Sepetember 3, 2004, to down load the forms or pay by credit from your website www.sunbiz.org. Since the website is not operational I have filled out a generic UBR. Kindly pardon the delay due to Hurricane Frances.

Thank You

Sincerely

Subramanian M Kumar

09/04/2004