

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001908

1. Entity Name

NAVA KERALA ARTS CLUB, INC.

**FILED**  
**Sep 13, 2000 8:00 am**  
**Secretary of State**

09-13-2000 90023 002 \*\*\*\*70.00

Principal Place of Business

9026 NW 24TH COURT  
 CORAL SPRINGS FL 33065  
 US

Mailing Address

9026 NW 24TH COURT  
 CORAL SPRINGS FL 33065  
 US

A0077450



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4661 NW 66TH DRIVE

3. Mailing Address

4661 NW 66TH DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-0558290

Applied For

Not Applicable

Zip

33067

Country

BROWARD

Zip

33067

Country

BROWARD

5. Certificate of Status Desired



\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

NIRAVEL, ANANDAN

9026 NW 24 CT

CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

GOPINATHAN NAIR

Street Address (P.O. Box Number is Not Acceptable)

4661 NW 66TH DR.

City

CORAL SPRINGS, FL

FL

Zip Code

33067

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]* GOPINATHAN NAIR - PRESIDENT.

8/23/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

Make Check Payable to  
 Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
 NAME LUKOSE, VINCENT  
 STREET ADDRESS 3715 NW 121 AVE  
 CITY-ST-ZIP SUNRISE FL 33323

TITLE D ☒ Delete  
 NAME VARGHESE, MATHEW  
 STREET ADDRESS 7127 NW 44 ST  
 CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☒ Delete  
 NAME VARGHESE, NICHOLAS  
 STREET ADDRESS 4040 NW 106 DR  
 CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT (DIRECTOR) ☒ Change ☐ Addition  
 NAME GOPINATHAN NAIR  
 STREET ADDRESS 4661 NW 66TH DR  
 CITY-ST-ZIP CORAL SPRINGS, FL 33067

TITLE D ☒ Change ☐ Addition  
 NAME BABU CHAKIATH  
 STREET ADDRESS 3741 NW 107th WAY  
 CITY-ST-ZIP SUNRISE, FL 33351

TITLE D ☒ Change ☐ Addition  
 NAME JAYANANDAN NAIR  
 STREET ADDRESS 750 NW 92nd AVE  
 CITY-ST-ZIP PEMBROKE PINES, FL 33024

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* GOPINATHAN NAIR

8/23/00

561 750 4735

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)