## **FILE NOW: FILING FEE IS \$61.25**

Mailing Address

3450 S.W. 3RD AVENUE MIAMI FL 33145

2a. Mailing Address

Suite, Apt. #, etc.

JUNEAU GMALLURED

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

3450 S.W. 3RD AVENUE

MIAMI FL 33145

21



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 04 1998 8:00am

Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

3. Date Incorporated or Qualified

07/11/1996

65-0676320

5. Certificate of Status Desired

6. Election Campaign Financing

1/28/98

4. FEI Number

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N96000003665 (4)

GANDHI REMEMBERED, INC.

22		27						Trust Fund C	ontribution		Added	to Fees	
City & State			City & State				7	7. Is this nonpro	ofit corporation	on a homed		ion?	
23			28					☐ Yes ☐XNo					
Zip	Co.	untry	Zip		Country	У		8	3. This corporat	ion owes or	has paid th		
24	25		29	30	<u> </u>				Personal Prop			<u> </u>	<b>≥</b> ₹No
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
						!   !	Name						
MODY, SURESH C						2 :	Street Address (P.O. Box Number is Not Acceptable)				ceptable)		
3450 S.W. 3RD AVENUE													
MIAMI FL 33145						83							
						1 (	City					85 Zip	Code
						J.,						FL   "	
11. Pursuant t	to the provisions of S	the above harized by	ve-r	named co he corpoi	orporati ration's	ion submits this board of direct	statement fo ors. I hereby	or the purpo accept the	ose of changing appointment a	its registered s registered			
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.													
SIGNATURE													
12.	Signature, typed or printed			le, (NOTE: R	egistered Age	gent :	signature rec	quired whe	en reinstating)	JANIOES TO	-	AND DIRECTO	10 1AL 20
	0.1102107100				1.1 TITLE				ADDITIONS/CI	TANGES TO	OFFICENC	Change	
TITLE	D NODY OUDTON											LI Olizilge	L Addition
NAME	MODY, SURES				1.2 NAME								
STREET ADDRESS 3450 S.W. 3RD AVENUE					1.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI FL 33145	)		DELETE	1.4 C/TY-S		ZIP					Change	Addition
TITLE	D			T pereir	2.1 TITLE							L1 Change	☐ Addition
NAME	MODY, RAMESI				2.2 NAME								
STREET ADDRESS	3450 S.W. 3RD				2.3 STREET		- 1						
CITY-ST-ZIP	MIAMI FL 33145	)		DELETE	2.4 CITY-5	-ST-	ZIP					Change	Addition
TITLE	D DENILLA	•		L Deterie	3.1 TITLE							Change	Addition
	MODY, RENU N						3.2 NAME						
STREET ADDRESS	0.00 0.00 0.00						3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						
CITY-ST-ZIP	MIAMI FL 33145	)		DELETE	4.1 TITLE	-51-	ZIP					Change	Addition
TITLE				C) DELETE								Orlange	radiiion
NAME					4. 2 NAME		, DOCCO						
STREET ADDRESS					4.3 STREET		ı						
CITY-ST-ZIP TITLE				DELETE	4.4 CITY - S 5.1 TITLE	51-2	417			· ·		Change	Addition
•				_ >	5.2 NAME							E Crango	
NAME													
STREET ADDRESS					5.3 STREET								
CITY-ST-ZIP				DELETE	5.4 CITY - S 6.1 TITLE	51-2	ZIP					Change	Addition
					6.2 NAME							5a.igo	
NAME					*		NODERO						
STREET ADDRESS					6.3 STREET								
CITY-ST-ZIP	ertify that the inform	ation supplied with	this filing doe	es not qualify for the	6.4 CITY-S	ST-Z	n stated	n Secti	ion 119 07/31/0	Florida Stat	tutes. I furth	er certify that th	e information
indicated officer or of	ertify that the inform on this annual repor director of the corpo	t or supplemental a	innual report i	s true and accura	ate and the	nat :	my signa port as re	ture sh quired	all have the san by Chapter 617	ne legal effe , Florida Sta	ct as if mad atutes; and	de under oath; ti that my name a	nat I am an ppears in
BIOCK 12 C	or Block 13 if change	o, or on an anachi	nen win an a	audi 622.									