

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004634

FILED
Apr 15, 2004
Secretary of State

Entity Name: HANUMAN SIDDHI MANDALI & CULTURAL CENTER INC.

Current Principal Place of Business:

806 26TH STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

5130 GREENWAY ROAD
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-3476256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SITAHAL, RAJENDRA R
5130 GREENWAY RD.
KISSIMMEE, FL 34746 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: PCHR () Delete
Name: SITAHAL, RAJENDRA R
Address: 5130 GREENWAY RD.
City-St-Zip: KISSIMMEE, FL 34746

Title: VPD () Delete
Name: BALGOBIN, SURSATIE
Address: 7079 BLAIR DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: SD () Delete
Name: HARI, SINGH
Address: 2713 LONGDALE DR
City-St-Zip: ORLANDO, FL 32817

Title: TD () Delete
Name: SAHADEO, KISHORE
Address: 7161 STEFFIE LANE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: NARINE, PT CHUNILALL
Address: 5130 GREENWAY ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: ALEONE, CHANDRA DR
Address: 306 RAVEN CIRCLE
City-St-Zip: WYOMING, DE 19934

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
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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 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: RAJENDRA R SITAHAL

PCHP

04/15/2004

Electronic Signature of Signing Officer or Director

Date