


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000005589**  
 1. Entity Name  
**RAMA KRISHNA HINDU ORGANIZATION FLORIDA, INC.**



Principal Place of Business  
**9906 NW 41ST STREET**  
**SUNRISE, FL 33351**

Mailing Address  
**9906 NW 41ST STREET**  
**SUNRISE, FL 33351**



02032008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0797921**

Applied For  
 Not Applicab

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**GOPAUL, BALLIRAM**  
**9906 NW 41 STREET**  
**SUNRISE, FL 33351**

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Arundine Mahara* DATE: **2/4/08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000817869  
 02/15/08-80021-003 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DASS, KENNETH 8110 NW 20 COURT SUNRISE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MAHARAT, JARMOONE E 11321 NW 32RD PL SUNRISE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BHAGWANDEEN, BEHARRYLAL 6271 NW 16 PLACE FORT LAUDERDALE, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BALLIRAM, GOPAUL 9906 N W 41 STREET SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Arundine Mahara* DATE: **2/4/08**