

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002670

FILED
Apr 30, 2009
Secretary of State

Entity Name: NATIONAL BUDGET PLANNERS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

6278 N. FEDERAL HIGHWAY
SUITE 289
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6278 N. FEDERAL HIGHWAY
SUITE 289
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0848095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: DVT () Delete
Name: SINGH, BHOPINDER
Address: 6278 N. FEDERAL HWY. SUITE 289
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PD () Delete
Name: KANWAR, SANJEEV KUMAR
Address: 6278 N. FEDERAL HIGHWAY SUITE 289
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: SD () Delete
Name: ENGINEER, PORUS
Address: 6278 N. FEDERAL HWY., SUITE 281
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: ENGINEER, PORUS
Address: 6278 N. FEDERAL HWY., SUITE 289
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SANJEEV KUMAR KANWAR

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date