## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N98000002670

TI FILED
Dec 23, 2009
Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

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

FEI Number: 65-0848095 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DVT ( ) Delete Title: DP (X) Change ( ) Addition

Name: SINGH, BHOPINDER Name: SINGH, BHOPINDER
Address: 6278 N. FEDERAL HWY. SUITE 289 Address: 6278 N. FEDERAL HWY. SUITE 289
City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PD ( ) Delete Title: DVST (X) Change ( ) Addition

Name: KANWAR, SANJEEV KUMAR Name: ENGINEER, PORUS

Address: 6278 N. FEDERAL HIGHWAY SUITE 289 Address: 6278 N. FEDERAL HIGHWAY SUITE 289

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ENGINEER, PORUS
 Name:

 Address:
 6278 N. FEDERAL HWY., SUITE 289
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33308
 City-St-Zip:

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: BHOPINDER SIGNH P 12/23/2009