2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N98000003245

Entity Name: ASSOCIATION OF PERFORMING ARTS OF INDIA, INC.

Current Principal Place of Business:

10831 N.W. 17 COURT
HOLLYWOOD, FL 33026

New Principal Place of Business:

Current Mailing Address:

10831 N.W. 17 COURT
HOLLYWOOD, FL 33026

New Mailing Address:

FEI Number: 31-1613301 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEITMAN, LORN
8660 W FLAGLER ST, STE 200
MIAMI, FL 33144 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:	D	( ) Delete
Name:	UMARANI, ENIASIVAM	
Address:	1624 NW 85TH DR	
City-St-Zip:	CORAL SPRINGS, FL 33071 US	
Title:	D	( ) Delete
Name:	CHOKSHI, DEENBANDHU S	
Address:	10831 NW 17TH CT	
City-St-Zip:	PEMBROKE PINES, FL 33026	
Title:	P	( ) Delete
Name:	CHOKSHI, BHARTI D	
Address:	10831 NW 17 CT	
City-St-Zip:	PEMBROKE PINES, FL 33026	
Title:	D	( ) Delete
Name:	THUMMALAPALLI, SRIDEVI	
Address:	19673 NW 82 PLACE	
City-St-Zip:	HIALEAH, FL 33015	
Title:	D	( ) Delete
Name:	BAKHAI, KASHYAP	
Address:	2680 EDGEWATER COURT	
City-St-Zip:	WESTON, FL 33332	
Title:	VP	( ) Delete
Name:	LESHAM, MIRON	
Address:	8018 MIZNER LN	
City-St-Zip:	BOCA RATON, FL 33433	

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
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KALIDINDI, MANJULA	
Address:	15726 SW 17TH STREET	
City-St-Zip:	WESTON, FL 33326	

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: BHARTI D.CHOKSHI PRES 04/16/2009

Electronic Signature of Signing Officer or Director — Date