

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005308

FILED
Mar 23, 2009
Secretary of State

Entity Name: JAIN VISHWA BHARATI USA, INC.

Current Principal Place of Business:

7819 LILLWILL AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

7819 LILLWILL AVENUE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3563048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHITALIA, DEVANG
1519 SUNSET VILLAGE BLVD
CLERMONT, FL 34711 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: CHM () Delete
Name: SHAH, KAMLESH
Address: 13605 KIRBY SMITH RD.
City-St-Zip: ORLANDO, FL 32832

Title: D () Delete
Name: NAGDA, HARSHADA
Address: 439 S.W. 48TH STREET RD.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: TOLIA, KISHORE
Address: 721 BEARCREEK CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S () Delete
Name: CHITALIA, DEVANG
Address: 1519 SUNSET VILLAGE BLVD
City-St-Zip: CLERMONT, FL 34711

Title: P () Delete
Name: TOLIA, KISHORE
Address: 721 BEARCREEK CIRCLE
City-St-Zip: WINTER SPRING, FL 32708

Title: VP () Delete
Name: DEVENDRA, MEHTA
Address: 3800 LOWER PARK RD
City-St-Zip: ORLANDO, FL 32814

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 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: KAMLESH SHAH

CHM

03/23/2009

Electronic Signature of Signing Officer or Director

Date