

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000121083

FILED  
Oct 15, 2009  
Secretary of State

Entity Name: TASTE OF INDIA INC

**Current Principal Place of Business:**

902 E. BRANDON BLVD.  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

902 E. BRANDON BLVD.  
BRANDON, FL 33511

**New Mailing Address:**

FEI Number: 22-3971523      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

ATCHISON MANAGEMENT  
107 LAS PALMAS  
MERRITT ISLAND, FL 32953 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: DEAM ATCHISON VP      10/15/2009  
Electronic Signature of Registered Agent      Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VADAPARAMBIL, ANIL S  
Address: 902 E. BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

Title: VTD ( ) Delete  
Name: THOMAS, GEORGE  
Address: 902 E. BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

Title: SD ( ) Delete  
Name: RAVIDRAN, KESAVAN  
Address: 902 E. BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete  
Name: LUKOSE, JOMON  
Address: 902 E. BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete  
Name: THOMAS, JOPPEN M  
Address: 902 E. BRANDON BLVD.  
City-St-Zip: BRANDON, FL 33511

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE THOMAS      VTD      10/15/2009  
Electronic Signature of Signing Officer or Director      Date