

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000003605

**Entity Name:** SUJAL INC.

**Current Principal Place of Business:**

15775 MENTON BAY CT  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

15775 MENTON BAY CT  
DELRAY BEACH, FL 33446 US

**FEI Number:** 27-2342320

**Certificate of Status Desired:** No

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

KAILASA, PRAKASH  
15775 MENTON BAY CT  
DELRAY BEACH, FL 33446 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

**Officer/Director Detail :**

Title D  
Name KAILASA, PRAKASH  
Address 15775 MENTON BAY CT  
City-State-Zip: DELRAY BEACH FL 33446

Title D  
Name KAILASA, MADHAVI  
Address 15775 MENTON BAY CT  
City-State-Zip: DELRAY BEACH FL 33446

Title D  
Name CHERIVIRALA, ANURADHA  
Address 14803 JACKSON SAWMILL LN  
City-State-Zip: SUGARLAND TX 77498

Title P  
Name KAILASA, SAMEER  
Address 15775 MENTON BAY CT  
City-State-Zip: DELRAY BEACH FL 33446

Title D  
Name MOONDHRA, RAAJEEV  
Address 6163 VISTA LINDA LN  
City-State-Zip: BOCA RATON FL 33433

*I hereby 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 all other like empowered.*

**SIGNATURE:** PRAKASH KAILASA

**DIRECTOR**

**03/30/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date