

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000008070

**Entity Name:** INDIAN NURSES ASSOCIATION OF SOUTH FLORIDA INC

**Current Principal Place of Business:**

5420 SW 166TH AVE  
SOUTH WEST RANCHES, FL 33331

**Current Mailing Address:**

5420 SW 166TH AVE  
SOUTH WEST RANCHES, FL 33331 US

**FEI Number:** 26-2135684

**Certificate of Status Desired:** No

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

VARKEY , BABY  
1806 N. FLAMINGO ROAD  
SUITE 340  
PEMBROKE PINES, FL 33028 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:** BABY VARKEY

05/20/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name VARGHESE, BOBBY  
Address 5240 SW 166TH AVE  
City-State-Zip: SOUTH WEST RANCHES FL 33331

Title S  
Name NAIR, PRIYA  
Address 5204 SW 87TH AVE  
City-State-Zip: COOPER CITY FL 33328

Title TREASURER  
Name ANTONY, BIJU  
Address 16235 NW 9TH DRIVE  
City-State-Zip: PEMBROKE PINES FL 33020

*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:** BIJU ANTONY

TREASURER

05/20/2019

Electronic Signature of Signing Officer/Director Detail

Date