2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006711

Entity Name: HINDU SWAYAMSEVAK SANGH-U.S.A., INC.

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Feb 09, 2017 Secretary of State CC4120276592

FILED

Current Principal Place of Business:

121 HAWTHORNE CT ROCKAWAY. NJ 07866-2252

Current Mailing Address:

121 HAWTHORNE CT

ROCKAWAY, NJ 07866-2252

FEI Number: 52-1647017 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BELSARE, YASHWANT 5202 ABBEY PARK AV TAMPA, FL 33647 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: YASHWANT BELSARE 02/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitlePRESIDENTTitleDIRECTORNameAMBASTHA, VINODNameSHAH, DINESH

Address 2230 AVONDALE DRIVE Address 8731 ROCKY VALLEY DR
City-State-Zip: FULLERTON CA 92833 City-State-Zip: HOUSTON TX 77083

Title SECRETARY Title TREASURER

NameMIRAJKAR, YELLOJI-RAO KNameGUPTA, YOGINDERAddress161 HANCOCK RDAddress121 HAWTHORNE CT

City-State-Zip: PISCATAWAY NJ 08854 City-State-Zip: ROCKAWAY NJ 07866-2252

Title DIRECTOR Title ASST. SECRETARY

Name JAVLEKAR, DHANANJAY Name SIMHA, VIJAY

Address 28 COOK ST Address 7944 MCCLELLAN RD APT 1

City-State-Zip: WESTBOROUGH MA 01581 City-State-Zip: CUPERTINO CA 95014

Title ASST. SECRETARY Title DIRECTOR

NameSHEVADE, SIDDHESHNameACHARYA, CHANDRUAddress2167 HORNCASTLE LNAddress43316 STONINGTON CTCity-State-Zip:NAPERVILLE IL 60564City-State-Zip:CNTON MI 48188

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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: YOGINDER GUPTA TREASURER 02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameBALSARE, YASHWANTNameSHUKLA, MAULIKAddress5202 ABBY PARK AVEAddress16234 SE 48TH ST

City-State-Zip: TAMPA FL 33647 City-State-Zip: BELLEVUE WA 98006