

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004900

Entity Name: VISHWA NIRMALA DHARMA CORPORATION**Current Principal Place of Business:**4565 SHERMAN OAKS AVE
SHERMAN OAKS, CA 91403**Current Mailing Address:**8361 NW 7TH ST
PEMBROKE PINES, FL 33024**FEI Number:** 33-0240163**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UPADHYA, LOUISA
8361 NW 7TH ST
PEMBROKE PINES, FL 33024 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 CH
Name SHRI MATAJI NIRMALA DEVI
SHRIVASTAVA
Address 4565 SHERMAN OAKS AVE
City-State-Zip: SHERMAN OAKS CA 91403

Title PRES
Name VANCE, CAROLYN
Address 4565 SHERMAN OAKS AVE
City-State-Zip: SHERMAN OAKS CA 91403

Title CFO
Name NALGILKAR, RAHUL
Address 4565 SHERMAN OAKS AVE
City-State-Zip: SHERMAN OAKS CA 91403

Title DIR
Name SHRIVASTAVA, C.P. SIR
Address 4565 SHERMAN OAKS AVE
City-State-Zip: SHERMAN OAKS CA 91403

Title SECT
Name LOUISA, UPADHYA
Address 4565 SHERMAN OAKS AVE
City-State-Zip: SHERMAN OAKS CA 91403

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: LOUISA UPADHYA**AGENT****02/09/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date