

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092580

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: YOGA ONE INC.

**Current Principal Place of Business:**

613 NORTH 21ST AVENUE  
HOLLYWOOD, FL 33020 US

**New Principal Place of Business:**

**Current Mailing Address:**

613 NORTH 21ST AVENUE  
HOLLYWOOD, FL 33020 US

**New Mailing Address:**

FEI Number: 20-3074759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FEINZIG, STEVEN  
613 NORTH 21ST AVENUE  
HOLLYWOOD, FL 33020 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: FEINZIG, STEVEN  
Address: 613 NORTH 21ST AVENUE  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: D ( ) Delete  
Name: FEINZIG, STEVEN  
Address: 613 NORTH 21ST AVENUE  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: VD ( ) Delete  
Name: FEINZIG, DARLENE  
Address: 1150 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33019 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: FEINZIG, DARLENE  
Address: 613 NORTH 21ST AVENUE  
City-St-Zip: HOLLYWOOD, FL 33020 US

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: DARLENE FEINZIG

VD

01/09/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date