

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000007810

FILED
Nov 01, 2006
Secretary of State

Entity Name: SELF DISCOVERY INC.

Current Principal Place of Business:

1515 NE 6 CT
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

6795 ALLEGRE CT
BOCA RATON, FL 33433 US

Current Mailing Address:

1515 NE 6 CT
FT. LAUDERDALE, FL 33304 US

New Mailing Address:

6795 ALLEGRE CT
BOCA RATON, FL 33433 US

FEI Number: 33-1027606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VIVIANI, LUISA
1515 NE 6 CT
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

VIVIANI, LUISA
6795 ALLEGRE CT
BOCA RATON, FL 33433 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: LUISA VIVIANI

11/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VIVIANI, LUISA
Address: 1515 NE 6 CT
City-St-Zip: FT. LAUDERDALE, FL 33304 US

Title: VP () Delete
Name: SINGH, PATRICK
Address: 2640 HURON WAY
City-St-Zip: MIRAMAR, FL 33025 US

Title: S () Delete
Name: PRASAD, MIRA
Address: 3101 SW 64 TERR
City-St-Zip: MIRAMAR, FL 33023 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VIVIANI, LUISA
Address: 6795 ALLEGRE CT
City-St-Zip: BOCA RATON, FL 33433 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUISA VIVIANI

PRES

11/01/2006

Electronic Signature of Signing Officer or Director

Date