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Mar 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000001152 (8) NC 12/29/97
 1. Corporation Name
~~KRIYA YOGA ASHRAM, INC.~~ KRIYA YOGA INSTITUTE, INC.



Principal Place of Business 3325 GRIFFIN RD. STE. 218 FT. LAUDERDALE FL 33312	Mailing Address 3325 GRIFFIN RD. STE. 218 FT. LAUDERDALE FL 33312
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3. Date Incorporated or Qualified 03/02/1993	4. FEI Number NOT APPLICABLE	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business 21 24757 SW 167th Avenue Suite, Apt. #, etc. 22 City & State 23 Homestead, FL 24 Zip 33031-1364 25 Country USA	2a. Mailing Address 26 24757 SW 167th Avenue Suite, Apt. #, etc. 27 City & State 28 Homestead, FL 29 Zip 33031-1364 30 Country USA
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9. Name and Address of Current Registered Agent TACKENBERG, ELIZABETH 100 SE 18TH COURT FT. LAUDERDALE FL 33316	10. Name and Address of New Registered Agent 81 Name Weisberg, Howard 82 Street Address (P.O. Box Number Is Not Acceptable) 24757 SW 167th Avenue 83 84 City Homestead FL 85 Zip Code 33031-1364
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Howard Weisberg* *Howard Weisberg* 3/11/98
 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDC GIRI, HARIHARANANDA SWAMI 6663 BAYFRONT DRIVE MARGATE FL 33063 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDT GIRI, PRAJNANANANDA SWAMI 6663 BAYFRONT DRIVE MARGATE FL 33063 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HENDERSON, ROBERT 18376 REITAN RD BAINBRIDGE ISLAND WA 98110 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	M GOLDMAN, DAVID 6318 BROOKLYN N.E. SEATTLE WA 98115 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD TACKENBERG, ELIZABETH 100 SE 18TH CT. FT. LAUDERDALE FL 33316 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	M GOLDMAN, CHARLOTTE 6318 BROOKLYN NE SEATTLE WA 98115 <input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PDC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Giri, Hariharananda Swami 24757 SW 167th Avenue Homestead, FL 33031-1364
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Giri, Prajnanananda Swami 24757 SW 167th Avenue Homestead, FL 33031-1364
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Giri, Vidyadhishananda Swami 24757 SW 167th Avenue Homestead, FL 33031-1364
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Giri, Sarveshwarananda Swami 24757 SW 167th Avenue Homestead, FL 33031-1364
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Weisberg, Howard 2472 SW 15th Street Miami, FL 33145 -85 3.20
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	700000246386 <input type="checkbox"/> Change <input type="checkbox"/> Addition -03/20/98--01037--030 ***70.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

Howard Weisberg 3/11/98 305 2472-1962

CR2E037 (10/97)