

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001152

FILED
Jul 02, 2007
Secretary of State

Entity Name: KRIYA YOGA INSTITUTE, INC.

Current Principal Place of Business:

24757 S.W. 167TH AVE.
HOMESTEAD, FL 330311364

New Principal Place of Business:

Current Mailing Address:

24757 S.W. 167TH AVE.
HOMESTEAD, FL 330311364

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

WIEBE, KATHARINE
24757 SW 167TH AVE.
HOMESTEAD, FL 330311364 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

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: GIRI, PRAJANANANDA SWAMI
Address: 24757 SW 167TH AVENUE
City-St-Zip: HOMESTEAD, FL 330311364

Title: TD () Delete
Name: WIEBE, KATHARINE
Address: 24757 SW 167TH AVENUE
City-St-Zip: HOMESTEAD, FL 330311364

Title: D () Delete
Name: SURESH, KODOLIKAR
Address: 10241 WETHERBURN RD
City-St-Zip: ELLICOTT CITY, MD 21042

Title: D () Delete
Name: TACKENBERG, ELIZABETH
Address: 90 ALTON RD APT 1810
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: LOPATEGUI, JOHN T
Address: 14961 SW 112 TER
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: BREILING, BRIAN
Address: 16470 FLAT RD
City-St-Zip: NEVADA CITY, CA 95959

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: KATHARINE WIEBE

TD

07/02/2007

Electronic Signature of Signing Officer or Director

Date