

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001152

FILED
Apr 30, 2011
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 US

New Mailing Address:

FEI Number: 52-1074796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: KODOLIKAR, SURESH
Address: 10241 WETHERBURN RD
City-St-Zip: ELLICOTT CITY, MD 21042 US

Title: VD
Name: JOSHI, ARVIND
Address: 24757 SW 167TH AVENUE
City-St-Zip: HOMESTEAD, FL 330311364 US

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

Title: TD
Name: WIEBE, KATHARINE
Address: 24757 SW 167 AVE
City-St-Zip: HOMESTEAD, FL 33031 US

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

Title: D
Name: GIVERT, MARK D
Address: 24757 SW 167 AVE
City-St-Zip: HOMESTEAD, FL 33031 US

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: KATHARINE WIEBE

TD

04/30/2011

Electronic Signature of Signing Officer or Director

Date