2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005987

Entity Name: THE PEACE INSTITUTE, INC.

FILED Mar 18, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1320 N SEMORAN 1586 N. GOLDENROD ROAD ORLANDO, FL 32807 SUITE 112 ORLANDO, FL 32817 **Current Mailing Address: New Mailing Address:** P.O. BOX 338 P.O. BOX 338 ORLANDO, FL 32817 GOLDENROD, FL 32733 FEI Number: 51-0421816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUSRI, MUHAMMAD 1089 N. GOLDENROD ROAD ORLANDO, FL 32807 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MUSRI, MUHAMMAD Name: Name: 1089 N. GOLDENROD ROAD Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition W. ERNEST GIBBS, Name: Name: KASU, ABDULLATIF Address: 3378 HILLMONT CIRCLE Address: 8008 COTE CT. ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32817 City-St-Zip: Title: () Delete Title: (X) Change () Addition MANSORI, ZÜBAIR Name: GIBBS, W. ERNEST Name: 915 SEMORAN BLVD. 3378 HILLMONT CIRCLE Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: ORLANDO, FL 32817 Title: () Delete Title: () Change () Addition Name: ZAMAN, AHMADI B Name: Address: 412 BARCLAY COURT Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: () Delete Title: () Change (X) Addition AKHTAR, SHAHEDA Name: Name: 4564 THORNLEA RD. Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32817 Title: () Delete Title: () Change (X) Addition THAKUR, MURAD Name: Name: Address: Address: 9905 LAKE GEORGIA DR. ORLANDO, FL 32817 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MUHAMMAD MUSRI PD 03/18/2004