

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000002154

FILED  
Sep 17, 2007  
Secretary of State

**Entity Name:** INTERNATIONAL CENTER FOR ART & CULTURE OF PALM BEACH COUNTY INC

**Current Principal Place of Business:**

7281 CHEESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436 US

**New Principal Place of Business:**

**Current Mailing Address:**

7281 CHEESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

**FEI Number:** 04-3745539 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:**

VALLURI, LAKSHMI R  
7281 CHEESAPEAKE CIRCLE  
BOYNTON BEACH, FL 33436 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: V.L.AKSHMI RAJESWARI

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LEWIS, BRUCE  
Address: 120 DATURA STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: VALLURI, LAKSHMI R  
Address: 7281 CHESAPEAKE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete  
Name: VALLURI, SARVESWARA P  
Address: 7281 CHESAPEAKE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete  
Name: KALLURI, DURGAPRASAD  
Address: 6701 MALLARDS COVE ROAD # 19G  
City-St-Zip: JUPITER, FL 33458 PB

Title: D ( ) Delete  
Name: QUADRI, SAOOD  
Address: 5410 EAST AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

**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:

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: LAKSHMI RAJESWARI VALLURI

DIR

09/17/2007

Electronic Signature of Signing Officer or Director

Date