## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0400006559

Entity Name: ABUNDANT KNOWLEDGE INC.

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

7818 PINE CROSSING CIRCLE 1720 W. WINTERGREEN BLVD. #1418 WINTER PARK, FL 32792

ORLANDO, FL 32807

**New Mailing Address:** 

**Current Mailing Address:** 

12444B LIBERTY BRIDGE RD 7818 PINE CROSSING CIRCLE #1418

FAIRFAX, VA 22033 ORLANDO, FL 32807

FEI Number: 20-1327689 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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:

SCHULTZ, MOE SLADEWSKI, TRAVIS

7818 PINE CROSSINGS CIRCLE 1720 W. WINTERGREEN BLVD #1418 WINTER PARK, FL 32792

ORLANDO, FL 32807 US

**OFFICERS AND DIRECTORS:** 

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: TRAVIS SLADEWSKI 01/08/2007

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

(X) Change ( ) Addition () Delete SCHULTZ, MOHAMMAD SCHULTZ, MOHAMMAD Name: Name:

4110 FAIRFAX HILLS WAY #23201 Address: 12444B LIBERTY BRIDGE RD Address:

City-St-Zip: FAIRFAX, VA 22030 City-St-Zip: FAIRFAX, VA 22033

(X) Change ( ) Addition Title: () Delete Title:

SCHULTZ, ROSE I Name: SCHULTZ, ROSE I Name:

Address: 4110 FAIRFAX HILLS WAY #23201 Address: 12444B LIBERTY BRIDGE RD

City-St-Zip: FAIRFAX, VA 22030 City-St-Zip: FAIRFAX, VA 22033

Title: () Delete Title: () Change () Addition

RYMARUK, GEORGE Name: Name: 12402 STONE CHURCH CT. Address: Address: City-St-Zip: HERNDON, VA 20170 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: JAMES, MIRANDA Name: 120 PARK AVENUE WEST Address: Address: City-St-Zip: DALLAS, GA 30157 City-St-Zip:

Title: () Delete Title: () Change () Addition

SLADEWSKI, TRAVIS Name: Name: 1720 W. WINTERGREEN BLVD. Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

SCHULTZ, MOE Name: Name: Address: 7818 PINE CROSSINGS CIRCLE, #1418 Address: ORLANDO, FL 32807 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 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: MOHAMMAD SCHULTZ CEO 01/08/2007