

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010456

FILED
Jan 07, 2006
Secretary of State

Entity Name: SRI BALA SAI HUMANITY SERVICE CORP., USA.

Current Principal Place of Business:

P O BOX 210242
ROYAL PALM BEACH, FL 33421

New Principal Place of Business:

P O BOX 8195
PORT ST-LUCIE, FL 34985

Current Mailing Address:

P O BOX 210242
ROYAL PALM BEACH, FL 33421

New Mailing Address:

P O BOX 8195
PORT ST-LUCIE, FL 34985

FEI Number: 20-1960053 **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:

THIMAIAH, VENKATARAJU
1024C GREEN PINE BLVD
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

THIMAIAH, VENKATARAJU
1285 S.W. BILTMORE STREET
SUITE- I
PORT ST-LUCIE, FL 34983 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: VENKATARAJU THIMAIAH

01/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THIMAIAH, VENKATARAJU
Address: P O BOX 210242
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D () Delete
Name: LAWRENCE, L. LYNN ESQ
Address: 12860 55 RD NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D () Delete
Name: RAO, T. RAMA
Address: P O BOX 210242
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D () Delete
Name: SHARMA, PJA DR.
Address: P O BOX 210242
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D () Delete
Name: PRASAD, SATYA
Address: P O BOX 210242
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D () Delete
Name: KURMAR, SURESH
Address: P O BOX 210242
City-St-Zip: ROYAL PALM BEACH, FL 33421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THIMAIAH, VENKATARAJU
Address: P O BOX 8195
City-St-Zip: PORT ST-LUCIE, FL 34985

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

Title: D (X) Change () Addition
Name: RAO, T. RAMA
Address: P O BOX 8195
City-St-Zip: PORT ST-LUCIE, FL 334985

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 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: VENKATARAJU THIMAIAH

P

01/07/2006

Electronic Signature of Signing Officer or Director

Date