## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000004135

Entity Name: KNOWLEDGE FOR LIVING, INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
595 W. CHURCH ST. #315 ORLANDO, FL 32805	116 B PARRAMORE AVENUE ORLANDO, FL 32901

Current Mailing Address: New Mailing Address:

P.O. BOX 555452 ORLANDO, FL 32855

FEI Number: 20-4693041 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:

HAMIDULLAH, AMINAH
595 W. CHURCH ST.
#315
ORLANDO, FL 32805 US

HAMIDULLAH, AMINAH
2854 TOLWORTH AVENUE
ORLANDO, FL 32837 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: 04/24/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete HAMIDULLAH, AMINAH HAMIDULLAH, AMINAH Name: Name: Address: 595 W. CHURCH ST. #315 Address: 2854 TOLWORTH AVENUE City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32837 (X) Change ( ) Addition Title: () Delete Title: TREA HAMIDULLAH, HATIM Name: Name: HAMIDULLAH, HATIM Address: 595 W. CHURCH ST. #315 Address: 2854 TOLWORTH AVENUE City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: KING, YUSEF Name: RIVERA, APRIL

Address: 1938 SINGER WAY Address: 14414 AVALON RESERVE BLVD #104

City-St-Zip: LITHONIA, GA 30058 City-St-Zip: ORLANDO, FL 32828

Title: ( ) Delete Title: SEC ( ) Change (X) Addition
Name: Name: DIAZ, JULIUS
Address: Address: 1390 TROPICAL DRIVE # 2122

City-St-Zip: City-St-Zip: ORLANDO, FL 32839

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

Name: Name: HENSON, GARY

Address: Address: 1290 NORTHRIDGE BLVD #721 City-St-Zip: CLAIRMONT, FL 34711

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: AMINAH HAMIDULLAH P/D 04/24/2007