2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# N11000007268

Entity Name: THE SHAKTIANANDA BABAJI MINISTRY FOR INTEGRAL SELF DEVELOPMENT INC

Current Principal Place of Business:

591 NW 35 PLACE
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

591 NW 35 PLACE
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 45-3039426 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOTA, JENNY
591 NW 35 PLACE
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: MOTA, JENNY
Address: 591 NW 35 PLACE
City-St-Zip: BOCA RATON, FL 33431 US

Title: DVP
Name: TUCKER, ERIKA M
Address: 1855 NE 121 ST APT 37
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: DS
Name: MAYO, VICTOR F
Address: 1855 NE 121 ST APT 37
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: DT
Name: WEISINGER, SANDRA
Address: 1701 SUNSET HARBOUR DRIVE APT 302
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: S
Name: ROMAN, SOLMARY
Address: 10 SW SOUTH RIVER DRIVE APT 605
City-St-Zip: MIAMI, FL 33130 US

I hereby 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 all other like empowered.

SIGNATURE: JENNY MOTA DP 05/01/2012

Electronic Signature of Signing Officer or Director Date