

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000008771

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** VAJRAYANA ARTS INSTITUTE, INC.

**Current Principal Place of Business:**

3050 NE 16 AVE #105  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

3050 NE 16 AVE #105  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

**FEI Number:** 45-4297066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHIRREFFS, ANITA  
3050 NE 16 AVE #105  
FORT LAUDERDALE, FL 33334 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:** D  
**Name:** TENZIN, LAMA PEMA  
**Address:** 61 UNION STONE DR  
**City-St-Zip:** SAN RAFAEL, CA 94903

**Title:** D  
**Name:** EARLE, JOHN  
**Address:** 1515 E BROWARD BLVD #306  
**City-St-Zip:** FORT LAUDERDALE, FL 33301

**Title:** D  
**Name:** SHIRREFFS, ANITA  
**Address:** 3050 NE 16 AVE #105  
**City-St-Zip:** FORT LAUDERDALE, FL 33334

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:** ANITA SHIRREFFS

MS

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date