

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 31, 2008  
Secretary of State**

DOCUMENT# N94000003566

Entity Name: TAJIRI ARTS INCROPORATED

**Current Principal Place of Business:**

519 PALMETTO AVE  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

782 HERITAGE LAKES DR.  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

FEI Number: 59-3262070      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WHATLEY, PATRICIA M  
782 HERITAGE LAKES DR  
JACKSONVILLE, FL 32218 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: PATRICIA M. WHATLEY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: WHATLEY, PATRICIA M  
Address: 782 HERITAGE LAKES DR.  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T ( ) Delete  
Name: DENNIS, WILLIE  
Address: 6858 HIDDEN GLADE PLACE  
City-St-Zip: SANFORD, FL 32771 US

Title: VC ( ) Delete  
Name: ELLISON, KITTY  
Address: 6814 W LIVINGSTON  
City-St-Zip: ORLANDO, FL 32825 US

Title: S ( ) Delete  
Name: CAL, LEDBETTER  
Address: 2806 WESSEX STREET  
City-St-Zip: ORLANDO, FL 32803 US

Title: MEM ( ) Delete  
Name: CAMILLA, BARNES  
Address: 1304 WEST 16TH STREET  
City-St-Zip: SANFORD, FL 32771 US

Title: MEM. (X) Delete  
Name: BUFORD, CAROL  
Address: 160 INTERNATIONAL PARKWAY  
City-St-Zip: HEATHROW, FL 32746 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: S (X) Change ( ) Addition  
Name: KENNETH, PRATT  
Address: 860 NORTH ORANGE AVENUE- #371  
City-St-Zip: ORLANDO, FL 32801 US

Title: MEM (X) Change ( ) Addition  
Name: JAMES, MELTON  
Address: 1893 WEST 18TH STREET  
City-St-Zip: SANFORD, FL 32771 US

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

I hereby certify that the information supplied with this filing does not qualify 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: KITTY ELLISON

VC

10/31/2008

Electronic Signature of Signing Officer or Director

Date