2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005
Secretary of State

DOCUMENT# N95000005455

Entity Name: THE SEMA INSTITUTE OF YOGA, RELIGIOUS AND TRANSPERSONAL PSYCHOLOGY STUDIES, INC.

Current Principal Place of Business:

10260 SW 160 TERR
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 570459
MIAMI, FL 33257 US

New Mailing Address:

FEI Number: 65-0696697 **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:

ASHBY, REGINALD
10260 SW 160 TERRACE
MIAMI, FL 33157 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 ( ) Delete
Name: ASHBY, RIGINALD
Address: 10260 S.W. 160 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: ASHBY, KAREN
Address: 10260 S.W. 160 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: CARNER, ASHBY
Address: 10260 S.W. 160 TERRACE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ASHBY, REGINALD
Address: 10260 S.W. 160 TERRACE
City-St-Zip: MIAMI, FL 33157

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

Title: D (X) Change ( ) Addition
Name: ASHBY, CARMEN
Address: 10260 S.W. 160 TERRACE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REGINALD ASHBY D 07/08/2005

Electronic Signature of Signing Officer or Director — Date