	PLEASE	READ ALL INS	LUCTIONS	Beru = u	LET	ING THIS FC RM.	200
APP	LICATION	FLORIE	A DEPARTMEN	T OF STATE		¥	•
FOR			Katherine Harris			FILED	
REINS	STATEMENT		Secretary of State			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TILING	/IA/CMCINI		DIVISION OF CORPOR	ATIONS	991	10 HA 61 VOV	
DOCUMENT # NOTOCOCCEUT						APARTIAL AT ATIME	
1. Corporation Name Rathashi: Tibeten Bullhis					TAEL	RETARY OF STARE	
meditation center, Inc.					11.000	ANIMODED PERMINE	
		,					
Principal Place of Business Mailing Address Jim HC/25							
1916 1	worth Nighla	in) 1100	Clevelany St				
1916 North Highland 1100 Cleveland St Street Clearacter FL Suite 1617 Clearacter FL 33755							
227 C5 FL 337 55							
If above addresses are incorrect in any way, line through incorrect information and enter correction below.							
2 New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4.						orated or Qualified ness in Florida 7 - 3-5	
Suite Apt. #, etc Suite, Apt. #			etc.		TO DO BUSI	ness in Florida 2-3-9	-
		Suite	1/6/27 5. FEI Nun			510218	Applied For
City & State		City & State	water AL			1515268	Not Applicable
Zip	Country	^z / ₃ 370		A	6. CERTIFICAT		fefeti vojak kajo grej grej v di genlativ ota jost Situatoja
7. Nomes on	d Street Addresses of Each			sione must list at los			
7. Names an	Name of	Officers	Stre	et Address of Each		Τ	
Title(s)	Title(s) and/or Directors		Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)		lumbers)	City / State / 2	/ip
P.D.	P.D. James P. Hayes			1100 Cleveland St. # 1617		Cheanicter Fh	. 33755
Michael Retchless Sam				GS G	bove	some as	chare
To cively churchucel			Same			Some	
0,0	- (- ()			~	·	Same	
				6		000030585461 -12/02/9301087004	
						****236,25 ***	**236 . 25
	8. Name and Address	of Current Registered Ag	lent		9. Name and	Address of New Registered Agent	t
Name							(12/98)
					P.O. Box Number is Not Acceptable)		
Clearacter FL 33755 Suite. Apr. 11.							5
	10010			City	·	State Zig	Code
10. I, being a	ppointed the registered age	nt of the above named corp	oration, am familiar wit	h and accept the of	oligations of Sect	ion 607.0505, F.S.	
Signature of Registered A	gent	REGISTERED A	GENT MUST SIGN		-	Date _//-/7-9	S
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes D No D (See other side for information on Intangible tax.)							
this reinst owed by t	atement application, the rea	son for dissolution has bee aid and the names of indiv	n eliminaled, the corpo- duals listed on this form	rate name satisfies n do not qualify for	the requirements an exemption un	apter 607 or 617, F.S. I further certific to 6 section 607,0401 or 617,0401, F der section 119,07(3)(i), F.S. The In	S., that all fees
SIGNATURE: 1. C. N Jumes P. Hayes 11-17-98 7274488089							
	SIGNATURE AND T	YPED OR PRINTED NAME OF	SIGNING OFFICER OR D	MECTOR		Date Daytime	Phone #