2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2002 8:00 AM
Secretary of State

DOCUMENT# P00000102612

Entity Name: SOUL SCIENCE INSTITUTE, INC.

Current Principal Place of Business:

210 WEST MAGNOLIA ST.
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

210 WEST MAGNOLIA ST.
APOPKA, FL 32703

New Mailing Address:

P.O. BOX 958
APOPKA, FL 32704

FEI Number: 59-3679932 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAHAFFEY, JAMES A
1425 W FOREST AVE
DELAND, FL 32720

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: MAHAFRY, JAMES A B
Address: 1425 W FOREST AVE
City-St-Zip: DELAND, FL 32720

Title: CM ( ) Delete
Name: MAHAFRY, JAMES A B
Address: 1425 W FOREST AVE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition
Name: MAHAFFEY, JAMES A B
Address: 1425 W FOREST AVE
City-St-Zip: DELAND, FL 32720

Title: MTS (X) Change ( ) Addition
Name: MAHAFFEY, JAMES A
Address: 1425 W FOREST AVE
City-St-Zip: DELAND, FL 32720

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A B MAHAFFEY PCD 02/15/2002

Electronic Signature of Signing Officer or Director — Date