

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000091320

Entity Name: SAFARI VENTURES, INC.

FILED
May 28, 2009
Secretary of State

Current Principal Place of Business:

3816 W. LINEBAUGH AVE
ST. 210
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

3816 WEST LINEBAUGH AVE
STE 210
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3743316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIRU PATEL SAFARI VENTURES INC
3816 WEST LINEBAUGH AVE
STE 210
TAMPA, FL 33624 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: NIRU PATEL

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: NEAL, GREG
Address: 17313 PREAKNESS PL
City-St-Zip: ODESSA, FL 33556

Title: CT () Delete
Name: PATEL, NIRANJAN
Address: 17311 PREAKNESS PL.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

SIGNATURE: GREG NEAL

P

05/28/2009

Electronic Signature of Signing Officer or Director

Date