


2006 FOR PROFIT CORPORATION REINSTATEMENT

Page 1 of 2

DOCUMENT # P04000082597		
1. Entity Name KABBALAH YOGA, INC.		

Principal Place of Business 21205 NE 37TH AVE. # 1905 AVENTURA, FL 33180	Mailing Address 21205 NE 37TH AVE. # 1905 AVENTURA, FL 33180
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
06 JAN -9 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01052006 REIN-P CR2E098 (11/05)

4. FEI Number EIN 03-0563510	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DAYAN, YVONNE 21205 NE 37TH AVE. # 1905 AVENTURA, FL 33180	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Yvonne Dayan (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAYAN, YVONNE 21205 NE 37TH AVE. AVENTURA, FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700064520347 01/25/06--01040--006 **308.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAYAN, YVONNE 21205 NE 37TH AVE. AVENTURA, FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAYAN, YVONNE 21205 NE 37TH AVE. AVENTURA, FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Yvonne Dayan

Document # P04000082597

P. Ayer 2/2

**DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314**

DEAR SIRs,

**I HEREBY WOULD LIKE TO NOTIFY YOU THAT I
DID NOT RECEIVE ANY LETTERS OR NOTICES
TO RENEW THE KABBALAH YOGA
CORPORATIONS.**

**WE WERE VICTIMS OF 4 HURRICANES HERE
IN NORTH MIAMI BEACH FLORIDA WHERE I
LIVE.** Here is a check to Reinststate My Company
For years 2005, + 2006, and 8.75 for a certificate

**I APPRECIATE YOUR KIND CONSIDERATION
FOR REINSTATING MY COMPANY AT YOUR
EARLIEST CONVENIENCE .**

THANKS AGAIN


**YVONNE DAYAN
305-936-0579**