2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 715290

1. Entity Name
EDISON CENTER BUILDING INCORPORATED

Principal Place of Business	Mailing Address
5598 N W 7TH AVE MIAMI, FL 33127 US	3011 N.W. 171ST STREET MIAMI, FL 33056

07092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-0809780
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEEKS, BOBBIE J
15545 SW 153 STREET
MIAMI, FL 33187

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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: Bobbie T. Meeks Bobbie J. Meeks 07/09/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HAMILTON, THOMAS H.
STREET ADDRESS	3011 NW 171ST STREET
CITY-ST-ZIP	MIAMI, FL 33055
TITLE	V
NAME	HARGRETTE, SALLIE
STREET ADDRESS	436 NW 19 STREET
CITY-ST-ZIP	MIAMI, FL 33136
TITLE	DT
NAME	MEEKS, BOBBIE
STREET ADDRESS	15545 S.W. 153RD STREET
CITY-ST-ZIP	MIAMI, FL 33187
TITLE	D
NAME	CHRISTMAS, FRANKLIN
STREET ADDRESS	755 N.W. 47TH TERRACE
CITY-ST-ZIP	MIAMI, FL 33127
TITLE	VTD
NAME	AUSTIN, KENNETH
STREET ADDRESS	61 KALANDAR STREET
CITY-ST-ZIP	OPA-LOCKA, FL 33054
TITLE	SD
NAME	SIMMONS, FRANCES
STREET ADDRESS	3125 N.W. 42ND STREET
CITY-ST-ZIP	MIAMI, FL 33142

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07/12/07-80004-007 61.25

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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 617, 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.

SIGNATURE: Thomas H. Hamilton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 7-9-07 Daytime Phone #