

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001967

FILED
Apr 30, 2006
Secretary of State

Entity Name: MIAMI KILLIAN HIGH SCHOOL CAGETTES, INC.

Current Principal Place of Business:

9116 SW 113 PLACE CIRCLE EAST
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

9116 SW 113 PLACE CIRCLE EAST
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0934996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEREZIN, ANGELICA C
9116 SW 113 PLACE CIRCLE EAST
MIAMI, FL 33176 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BEREZIN, ANGELICA C
Address: 9116 SW 113 PLACE CIRCLE EAST
City-St-Zip: MIAMI, FL 33176

Title: PD () Delete
Name: HARRISON, KATHY
Address: 9960 SW 105 AVENUE
City-St-Zip: MIAMI, FL 33176

Title: VPD () Delete
Name: SAULS, ELIZABETH
Address: 10421 SW 107 STREET
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: KOPPE, LISA
Address: 13826 SW 102 COURT
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: ANGELICA C. BERZIN

TD

04/30/2006

Electronic Signature of Signing Officer or Director

Date