2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N00000007475

Entity Name: ABSTINENCE BETWEEN STRONG TEENS, INC.

Current Principal Place of Business:

18151 SW 98 COURT
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

18151 SW 98 COURT
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-1054347 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMILLAN, ALTHEA F
10371 SW 152ND STREET
MIAMI, FL 33152 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:	PD	( ) Delete
Name:	MCMILLAN, ALTHEA F	
Address:	10371 SW 152ND STREET	
City-St-Zip:	MIAMI, FL 33152	
Title:	VP	( ) Delete
Name:	TROUP, KIM A	
Address:	10371 S.W. 152ND STREET	
City-St-Zip:	MIAMI, FL 33157	
Title:	VD	( ) Delete
Name:	SNEAD, TANGELA	
Address:	10371 SW 152ND STREET	
City-St-Zip:	MIAMI, FL 33152	
Title:	TD	( ) Delete
Name:	MCMILLAN, JOHN	
Address:	10371 SW 152ND STREET	
City-St-Zip:	MIAMI, FL 33152	
Title:	SD	( ) Delete
Name:	VENNING, CETER M	
Address:	10371 S.W. 152ND STREET	
City-St-Zip:	MIAMI, FL 33157	
Title:	VP	( ) Delete
Name:	FERGUSON, ARLINGTON JR.	
Address:	3110 NW 211 STREET	
City-St-Zip:	MIAMI, FL 33056	

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

SIGNATURE: ALTHEA MCMILLAN PD 04/29/2005

Electronic Signature of Signing Officer or Director — Date