2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008700

FILED Mar 03, 2006 Secretary of State

Entity Name: TOGETHER, HAPPY AND FOREVER FOUNDATION CORP

Current Principal Place of Business: New Principal Place of Business:

8527 PINES BLVD 8527 PINES BLVD

SUITE 208 SUITE 206

PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024

Current Mailing Address: New Mailing Address:

8527 PINES BLVD 8527 PINES BLVD

SUITE 206 SUITE 208

PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024

FEI Number: 20-1622758 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERNANDEZ, LUIS A SR. FERNANDEZ, LUIS A SR. 8527 PINES BLVD 8527 PINES BLVD

SUITE 206 SUITE 208

PEMBROKE PINES, FL 33024 US PEMBROKE PINES, FL 33024 US

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: LUIS FERNANDEZ 03/03/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

FERNANDEZ, LUIS A SR. FERNANDEZ, LUIS A SR. Name: Name:

151 SW 95 TERRACE #202 Address: 10580 NW 6 ST Address:

City-St-Zip: PEMBROKE PINES, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: (X) Delete Title: () Change () Addition

RIVERA, DAVID S PR. Name: Name: Address: 8527 PINES BLVD #208 Address: City-St-Zip: PEMBROKE PINES, FL 33024 US City-St-Zip:

Title: () Delete Title: () Change () Addition

FRANCO, ALVARO E SR. Name: Name: 4953 SW 163 AVE. Address: Address: City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip:

Title: () Delete Title: () Change () Addition

RAMIREZ, JAIME SR. Name: Name: 19156 NW 24 COURT Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 US City-St-Zip:

Title: Title: SUBS () Delete () Change () Addition

FALLAS, MARIO A SR Name: Name: 111 NW 8TH AVE # B3 Address: Address: City-St-Zip: HALLANDALE, FL 33009 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: LUIS FERNANDEZ Р 03/03/2006