

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007
Secretary of State

DOCUMENT# N04000010375

Entity Name: ESSENCE OF FIRE, INC.

Current Principal Place of Business:

9850 SW 81 STREET
SOUTH MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9850 SW 81 STREET
SOUTH MIAMI, FL 33173

New Mailing Address:

FEI Number: 20-2113686 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOSEPH, KAREN M
9850 SW 81 STREET
SOUTH MIAMI, FL 33173 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: P () Delete
Name: JOSEPH, KAREN M
Address: 9850 SW 81 STREET
City-St-Zip: SOUTH MIAMI, FL 33173

Title: VP () Delete
Name: POTTER, SABRINA
Address: 829 HUDSON LANE
City-St-Zip: PORT ORANGE, FL 32129

Title: TREA () Delete
Name: WILSON, KEISHA L
Address: 19148 NW 33 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: B/M () Delete
Name: BALOGUN, DEBORAH
Address: 75 NE 128 TERRACE
City-St-Zip: NORTH MIAMI, FL 33161

Title: B/M () Delete
Name: BRAYNON, OSCAR II
Address: 1701 NW 191 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: B/M () Delete
Name: ST. LOUIS, STEVE
Address: 3805 EAST LAKE TERRACE
City-St-Zip: MIRAMAR, FL 33023

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:

I hereby certify that the information supplied with this filing does not qualify 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: KEISHA WILSON

TREA

05/14/2007

Electronic Signature of Signing Officer or Director

_____ Date