2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004697

Entity Name: SAVE THE CHILDREN FOUNDATION INC

FILED Sep 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8345 NW 66TH ST # 4515 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 8345 NW 66TH ST # 4515 MIAMI, FL 33166 FEI Number: 26-2516218 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: Name and Address of New Registered Agent: SEREEN, RABIEH 2808 RIPTON CT ORLANDO, FL 32835 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RABIEH, SEREEN Name: Name: 2808 RIPTON CT Address: Address: City-St-Zip: ORLANDO, FL 32835 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: RABIEH, DAVID Name: SANDOKA, ZIAD Address: 7712 CHAPELHILL DR Address: 8345 NW 66TH ST # 4515 City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: MIAMI, FL 33166 US Title: () Delete Title: () Change (X) Addition ASFARI, NOUR Name: Name: 8800 SHADOW BAY DR Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: () Change (X) Addition Name: Name: ALDAMETH, WALEED 107 WOODBURRY CIRCLE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: () Change (X) Addition ALQADDOUMI, LINA Name: Name: 8345 NW 66TH ST # 4515 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33166 Title: () Delete Title: () Change (X) Addition SANDOKA, ZIAD Name: Name: Address: Address: 8345 NW 66TH ST # 4515

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.

City-St-Zip:

MIAMI, FL 33166

SIGNATURE: SEREEN RABIEH P 09/15/2009

City-St-Zip: