

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16560

FILED
Apr 10, 2006
Secretary of State

Entity Name: THE ORGANIZATION FOR THE REHABILITATION OF THE ENVIRONMENT, INC.

Current Principal Place of Business:

3750 MAIN HIGHWAY
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3750 MAIN HIGHWAY
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 59-2588147 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FINNIGAN, SHAUN M
3750 MAIN HIGHWAY
MIAMI, FL 33133 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: FINNIGAN, SHAUN,
Address: 3750 MAIN HWY
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: MAGLOIRE, ELIASSAINT,
Address: POST OFFICE BOX 2314 N/A
City-St-Zip: PORT-AU-PRINCE, HAITI,

Title: SD () Delete
Name: FINNIGAN, MONIQUE,
Address: 3750 MAIN HWY
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: GOODWIN, STEVE, MR
Address: 110 CRESTVIEW RD
City-St-Zip: WESTPOINT, GA 31833

Title: D () Delete
Name: DOORLEY, ANNE MS
Address: FLAT 49, QUAYSIDE HOUSE, 302 KENSAL ROAD
City-St-Zip: LONDON, UK W10 5BF UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: SHAUN FINNIGAN

PD

04/10/2006

Electronic Signature of Signing Officer or Director

Date