2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26546

FILED Feb 02, 2006 Secretary of State

Entity Name: PARENT TO PARENT OF MIAMI, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
7990 SW # 201	117TH AVE					
MIAMI, FL	33183 US					
Current M	lailing Addres	s:	New Maili	ing Address:		
7990 SW	117TH AVE					
# 201 MIAMI, FL	33183 US					
•	: 65-0022052	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired	()	
Name and	d Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
GARCIA, I 4530 SW MIAMI, FL	ISABEL C 149TH COURT 33185 US					
	e named entity s e of Florida.	submits this statement for the p	purpose of changing i	its registered office or registered agent, o	r both	
SIGNATU						
	Electron	nic Signature of Registered Ag	ent	Date		
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIR	ECTC		
Fitle: Name: Address: Dity-St-Zip:	ED () GARCIA, ISABE 4530 SW 149 C MIAMI, FL 331	СТ	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Nddress: Dity-St-Zip:	P () KNEIPPLE, MA 2920 S.W. 80 A MIAMI, FL 331:	\VE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Fitle: Name: Address: City-St-Zip:	T () GARCIA, FARIE 5108 DONATEL CORAL GABLE	LO STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Γitle:	VP () BORROTO, CIN 300 W. 74TH P	LACE #103	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SEQUENZIA, VENERANDO 19732 NE 12TH PLACE N.MIAMI BEACH, FL 33179		
Name: Address: City-St-Zip:	HIALEAH, FL 3					
√ame: √ddress:	HIALEAH, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: ISABEL C. GARCIA ED 02/02/2006