2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001037

Entity Name: MIAMI KIWANIS YOUTH FOUNDATION, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
Current Finicipal Flace of Business.			14000 1 11110	ipai i iace oi L	ousiness.	
10733 SW MIAMI, FL	129 PLACE 33186 US					
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 3 MIAMI, FL						
FEI Number: 59-0992992 FEI Number Applied For () FEI I			FEI Number Not App	umber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: N				Name and Address of New Registered Agent:		
MAZZARE 10733 SW MIAMI, FL	129 PLACE					
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:						
	Electron	ic Signature of Registered Agent	İ		Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES 1	O OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () CAMARON, BILI 7305 SW 123 T MIAMI, FL 3315	ERR	Title: Name: Address: City-St-Zip:	D (X) ROSS, BRUCE 13921 SW 69TH MIAMI, FL 3318		
Title: Name: Address: City-St-Zip:	T () MAZZARELLA, , 10733 SW 129 MIAMI, FL 3318	PLACE	Title: Name: Address: City-St-Zip:	()	Change ()Addition	
Title: Name: Address: City-St-Zip:	D () BUKSCH, BOB 8241 SW 107TH MIAMI, FL 3315		Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	S () CADMAN, IV, GI 9233 SW 212 T MIAMI, FL 3315	ERR	Title: Name: Address: City-St-Zip:	S (X) CADMAN, IV, GE 9233 SW 212 TE MIAMI, FL 3315	ERR	
Title: Name: Address: City-St-Zip:	P () HUGUES, ROBE 1350 SW 105TH MIAMI, FL 3317	AVE	Title: Name: Address: City-St-Zip:	D (X) HUGUES, ROBE 1350 SW 105TH MIAMI, FL 3317	AVE	
Title: Name: Address: City-St-Zip:	V () DACKS, VALER 6916 SW 43RD MIAMI, FL 3317	ST.	Title: Name: Address: City-St-Zip:	P (X) DACKS, VALERI 6916 SW 43RD MIAMI, FL 3317	ST.	

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: JOHN R. MAZZARELLA, JR T 04/17/2006