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May 07, 1999 8:00 am
Secretary of State

05-07-1999 90052 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000064511			
1. Corporation Name COMMUNITY BOOK & DANCE CLUB, INC.			
Principal Place of Business 2620 HURON WAY MIRAMAR FL 33025		Mailing Address 2620 HURON WAY MIRAMAR FL 33025	



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13250 NW 28th ave. Suite, Apt. #, etc.		2a. Mailing Address 26 2620 HURON WAY Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/22/1998	
22 City & State 23 OPA, LOCKA FL.		27 City & State 28 MIRAMAR FL 33025		4. FEI Number 650730081	
24 Zip 33054		25 Country AMERICA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 Zip 33025		30 Country FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent AGYAPONG, LINDA 2620 HURON WAY MIRAMAR FL 33025				8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent			
81 Name		85 Zip Code	
82 Street Address (P.O. Box Number is Not Acceptable)		84 City	
83		FL	

11. Pursuant to the provisions of Sections 607.0542 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.1508, Florida Statutes.

SIGNATURE: Linda Agypong DATE: 5/1/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Member	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charles Oquua	1.2 NAME	
STREET ADDRESS	13250 N.W. 28th ave	1.3 STREET ADDRESS	
CITY-ST-ZIP	OPA, LOCKA, FL. 33054	1.4 CITY-ST-ZIP	
TITLE	Dr. O.A. Agypong	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	member	2.2 NAME	
STREET ADDRESS	2309 Tupelo Terr.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FLA. 32304	2.4 CITY-ST-ZIP	
TITLE	Member	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Angela Malcolm	3.2 NAME	
STREET ADDRESS	13250 N.W. 28th ave.	3.3 STREET ADDRESS	
CITY-ST-ZIP	OPA, LOCKA, FL. 33054	3.4 CITY-ST-ZIP	
TITLE	Linda Agypong	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Director / CEO	4.2 NAME	
STREET ADDRESS	2620 HURON WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR, FL. 33025	4.4 CITY-ST-ZIP	
TITLE	Ama Agypong	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice-President	5.2 NAME	
STREET ADDRESS	2620 HURON WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR, FL. 33025	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address, with all other like empowered.

SIGNATURE: Linda Agypong DATE: 5/1/99 (954) 441-0075

CR2E034 (1/98)