

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2006 8:00 am
Secretary of State

08-14-2006 90038 046 ****61.25

DOCUMENT # N30907 1. Entity Name HIS HOUSE, INC.					
Principal Place of Business 20000 NW 47TH AVE. BLDG. 6A OPA-LOCKA, FL 33055 US			Mailing Address 20000 NW 47TH AVE. BLDG. 6A OPA-LOCKA, FL 33055 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-0145994				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CACERES-GONZALEZ, JEAN 20000 NW 47TH AVENUE BLDG. 6A OPA-LOCKA, FL 33055			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P/D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CACERES-GONZALEZ, JEAN		NAME		
STREET ADDRESS	20000 NW 47TH AVENUE BLDG 22		STREET ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 33055		CITY-ST-ZIP		
TITLE	T/D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GONZALEZ, MARIO		NAME		
STREET ADDRESS	20000 NW 47TH AVENUE BLDG 22		STREET ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 33055		CITY-ST-ZIP		
TITLE	V	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CACERES, JULIE		NAME		
STREET ADDRESS	6956 WILLOW LANE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES, FL 33014		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CACERES, JOSEPH F		NAME		
STREET ADDRESS	14131 LAKE CANDLEWOOD COURT		STREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES, FL 33014		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CARLOS, FERNANDEZ		NAME		
STREET ADDRESS	8955 SW 93RD COURT		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33176		CITY-ST-ZIP		
TITLE	C	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	MENENDEZ, JOSE		NAME	CHAIRMAN	
STREET ADDRESS	341 SW 184 TERRACE		STREET ADDRESS	WILLIAM MARTIN	
CITY-ST-ZIP	PEMBROKE PINES, FL 33029		STREET ADDRESS	1251 Quail Avenue	
			CITY-ST-ZIP	MIAMI SPRINGS, FL 33166	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>JEAN CACERES-GONZALEZ</i>			Date: <i>7/31/06</i> (305) 430-0085		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



ATTACHMENT

40101255
#N30907

**MEMBERS OF THE BOARD OF DIRECTORS
AS OF 04/06**

H Jean Cáceres-Gonzalez
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B Daryl Edwards
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H Carlos Fernández (Secretary)
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W Nancy Roberts
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W Bill Martin (Chairman)
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H Kathy Perez-Gurri
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H Victoria Villalba
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W Pike Rowley
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