

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011873

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** M.E.M.R.A. INTERNATIONAL FOUNDATION & TRAINING CENTER, INC.

**Current Principal Place of Business:**

79 NW 54TH ST  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

79 NW 54TH ST  
MIAMI, FL 33127

**New Mailing Address:**

**FEI Number:** 20-2059042

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILLMAN, PILBERT  
6289 W SUNRISE BLVD  
STE 250  
SUNRISE, FL 33313 US

**Name and Address of New Registered Agent:**

LUXAMA, JEAN ROMANES  
195 NE 167 ST  
N MIAMI BEACH, FL 33162 US

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: JEAN ROMANES LUXAMA

04/17/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PRUDENT, NAOMIE ESTHER  
Address: 13428 SW 31ST ST  
City-St-Zip: MIRAMAR, FL 33027

Title: VPD ( ) Delete  
Name: LUXAMA, JEAN ROMANES  
Address: 1951 NE 167TH ST  
City-St-Zip: N MIAMI BEACH, FL 33162

Title: AD ( ) Delete  
Name: BATRONY, SARADJINE  
Address: 651 NW 73 TERR  
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD ( ) Delete  
Name: MILLIANCE DAVILMAR, ROSE S  
Address: 2133 RENAISSANCE BLVD #304  
City-St-Zip: MIRAMAR, FL 33025

Title: TD ( ) Delete  
Name: PRUDENT, WILNER  
Address: 13428 SW 31ST ST  
City-St-Zip: MIRAMAR, FL 33027

Title: AD ( ) Delete  
Name: JACQUES, NESLY  
Address: 1211 SW MINYO AVENUE  
City-St-Zip: PORT ST LUCIE, FL 34953

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JEAN ROMANES LUXAMA

AD

04/17/2007

Electronic Signature of Signing Officer or Director

Date