

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005802

Entity Name: SOUTH TEMPLE EMPOWERMENT PROJECT, INC.**Current Principal Place of Business:**4400 NW 17TH AVE
MIAMI, FL 33142**Current Mailing Address:**P.O. BOX 420766
MIAMI, FL 33242**FEI Number: 37-1463324****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DAVIS, JOHNNY
1070 NW 91ST STREET
MIAMI, FL 33150 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	C/P
Name	DAVIS, JOHNNY
Address	1070 NW 91ST STREET
City-State-Zip:	MIAMI FL 33150

Title	DS
Name	NELZI, JEAN
Address	1377 NW 75TH TERR.
City-State-Zip:	MIAMI FL 33142

Title	VP
Name	JACKSON, DWIGHT
Address	4500 NW 17TH AVE.
City-State-Zip:	MIAMI FL 33142

Title	VCVP
Name	NARTY, ERNEST
Address	1019 NW 66TH STREET
City-State-Zip:	MIAMI FL 33150

Title	DT
Name	LITTLE, DANIEL
Address	1730 NW 41ST STREET
City-State-Zip:	MIAMI FL 33142

Title	VP
Name	DAVIS, BRIAN
Address	1377 NW 75TH TERRACE
City-State-Zip:	MIAMI FL 33142

I hereby 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 all other like empowered.

SIGNATURE: JOHNNY DAVIS**C/P****04/21/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date