Entity Name: COMMUNITY INVOLVEMENT AND IMPROVEMENT FOUNDATION CORP

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

11540 NW 29TH PLACE SUNRISE, FL 33323

Current Mailing Address:

DOCUMENT# N11000005423

11540 NW 29TH PLACE SUNRISE, FL 33323

FEI Number: 45-2460819

Name and Address of Current Registered Agent:

PUWOL, DAVID M 11540 NW 29TH PLACE SUNRISE, FL 33323 US Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :				
Title	Р	Title	S	
Name	PUWOL, DAVID M	Name	JACOBSON, DEBBIE DR	
Address	11540 NW 29TH PLACE	Address	7025 WOODMONT WAY	
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	TAMARAC FL 33321	
Title	т	Title	V	
Name	NGUM, CHRISTOPHER N	Name	POWTAKIEN, VIVIAN T	
Address	11540 NW 29TH PLACE	Address	11540 NW 29TH PLACE	
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323	
Title	D	Title	D	
Name	TANYI, ENOCH	Name	CHIN, ROBERT	
Name Address	TANYI, ENOCH 11540 NW 29TH PLACE	Name Address	CHIN, ROBERT 11540 NW 29TH PLACE	
Address	11540 NW 29TH PLACE	Address	11540 NW 29TH PLACE	
Address City-State-Zip:	11540 NW 29TH PLACE SUNRISE FL 33323	Address City-State-Zip:	11540 NW 29TH PLACE SUNRISE FL 33323	
Address City-State-Zip: Title	11540 NW 29TH PLACE SUNRISE FL 33323 DIRECTOR	Address City-State-Zip: Title	11540 NW 29TH PLACE SUNRISE FL 33323 DIRECTOR	
Address City-State-Zip: Title Name	11540 NW 29TH PLACE SUNRISE FL 33323 DIRECTOR NKEMLEKE, AMSHETU	Address City-State-Zip: Title Name	11540 NW 29TH PLACE SUNRISE FL 33323 DIRECTOR NKOUAGA, FERDINAND 11540 NW 29TH PLACE	

Continues on page 2

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.

Electronic Circoture of Circing Officer/Director Detail		a :
SIGNATURE: DAVID PUWOL	PRESIDENT	04/19/2016

Electronic Signature of Signing Officer/Director Detail

FILED Apr 19, 2016 Secretary of State CC1113085545

Date

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BOVOUM, ANTOINE
Address	11540 NW 29TH PLACE
City-State-Zip:	SUNRISE FL 33323