

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001177

**Entity Name:** SUPPORT, AID & FUNDAMENTAL ESSENTIALS FOR CHILDREN, INC.

**FILED**  
**Feb 20, 2013**  
**Secretary of State**  
**CC9874467995**

**Current Principal Place of Business:**

1072 N. OCEAN BLVD.  
PALM BEACH, FL 33480

**Current Mailing Address:**

1072 N. OCEAN BLVD.  
PALM BEACH, FL 33480 US

**FEI Number: 65-0678586**

**Certificate of Status Desired: No**

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

ABOUZEID, DIANA  
1072 N. OCEAN BLVD.  
PALM BEACH, FL 33480 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 D  
Name ABOUZEID, DIANA  
Address 1072 NORTH OCEAN BLVD.  
City-State-Zip: PALM BEACH FL 33480

Title D  
Name ABOUZEID, GEORGE  
Address 1072 NORTH OCEAN BLVD  
City-State-Zip: PALM BEACH FL 33480

Title D  
Name CHASE-PASKIN, NINA WESQ.  
Address 2579 WINDSOR WAY COURT  
City-State-Zip: WEST PALM BEACH FL 33414

*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: DIANA ABOUZEID

DIRECTOR

02/20/2013

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date