

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704408

FILED
Apr 26, 2004
Secretary of State**Entity Name:** THE BERTHA ABESS CHILDREN'S CENTER, INC.**Current Principal Place of Business:**1056 17 STREET
MIAMI BEACH, FL 33129 US**New Principal Place of Business:****Current Mailing Address:**1056 17 STREET
MIAMI BEACH, FL 33129 US**New Mailing Address:****FEI Number:** 59-0976373 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOORE, GERALD
333 NE 23RD STREET
MIAMI, FL 33137 US**Name and Address of New Registered Agent:**

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**OFFICERS AND DIRECTORS:****Title:** VD () Delete
Name: CUEVAS, GILBERTO,
Address: 5801 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**Title:** PD () Delete
Name: MOORE, ROBERT DR,
Address: 5801 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**Title:** T () Delete
Name: MOORE, GERALD,
Address: 5801 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**Title:** D () Delete
Name: JAEGER, CAROLYN J.,
Address: 5801 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**Title:** SD () Delete
Name: LUDWIG, SIDNEY MRS.,
Address: 5801 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**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
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City-St-Zip:**Title:** () Change () Addition
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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 Section 119.07(3)(i), 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: CAROLYN JENKIS-JAEGER

MRS.

04/26/2004

Electronic Signature of Signing Officer or Director_____
Date