

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713125

FILED
Apr 04, 2007
Secretary of State

Entity Name: BAHAMIAN AMERICAN FEDERATION, INC.

Current Principal Place of Business:

P.O. BOX 370862
MIAMI, FL 33137

New Principal Place of Business:

1725 NW. 179TH ST.
MIAMI, FL 33137

Current Mailing Address:

P.O. BOX 370862
MIAMI, FL 33137

New Mailing Address:

P.O. BOX 370862
MIAMI, FL 33056

FEI Number: 59-1803551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, GEORGE E
1725 NW 179
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

JOHNSON, GEORGE E
1725 NW 179 ST.
MIAMI, FL 33056 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: GEORGE E. JOHNSON

04/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, GEORGE E
Address: 1725 NW 179TH STREET
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: LUTHRE, SYMONETTE
Address: 801 N.W. 3RD TERRACE
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: DANIELS, WILLIAM
Address: 1301 EAST BROWARD BLVD
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Delete
Name: FERGUSON, EDROY
Address: 3180 N.W. 157TH STREET
City-St-Zip: OPALOCK, FL 33054

Title: D () Delete
Name: MOSS, SHERRI
Address: 270 N.W. 81ST STREET
City-St-Zip: MIAMI, FL 00000, 33150

Title: S () Delete
Name: WILLIAMS, JANET E
Address: 7401 NW 3RD AVE
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DANIELS, WILLIAM
Address: 540 NW. 4TH AVE. APT 3215
City-St-Zip: FT LAUDERDALE, FL 33311

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: WILLIAM DANIELS

D

04/04/2007

Electronic Signature of Signing Officer or Director

Date