

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751295

FILED
Jun 08, 2004
Secretary of State

Entity Name: NEW DIRECTIONS EMPLOYMENT AND TRAINING SERVICES, INC.

Current Principal Place of Business:

5555 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

5555 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

FEI Number: 59-1989833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARRA, GABRIEL
3270 JAVA PLUM AVE.
SUITE 103
MIRAMAR, FL 33025 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: PD () Delete
Name: PARRA, GARRIEL H
Address: 19921 NW 2ND STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD (X) Delete
Name: MANTILLA, MIGUEL M
Address: 2333 BRICKELL AVENUE APT. 2303
City-St-Zip: MIAMI, FL 33191

Title: SD (X) Delete
Name: ANDRADE, BERNANDO
Address: 8267 SW 128 STREET APT. #118
City-St-Zip: MIAMI, FL 33156

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
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: GABRIEL PARRA

PD

06/08/2004

Electronic Signature of Signing Officer or Director

Date