2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001581

FILED May 16, 2009 Secretary of State

Entity Na			
Current P	Principal Place of Business:	New Principal Place of Business:	
	MBERLY BLVD E, FL 33068	3775 NW 16TH STREET LAUDERHILL, FL 33311	
Current M	lailing Address:	New Mailing Address:	
	2ND AVE JDERDALE, FL 33304	1429 N.E. 2ND AVENUE FORT LAUDERDALE, FL 33304	
	:: 65-1011135 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status I not receive the prior notice.	Desired ()
	d Address of Current Registered Agent:	Name and Address of New Registered Ago	ent:
	SE, MARTINO REV		
FORT LAI	2ND AVE JDERDALE, FL 33304 US	e numbee of changing its registered office or registered as	gent or both
FORT LAUTHE The above n the State	2ND AVE JDERDALE, FL 33304 US e named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered aç	gent, or both,
FORT LAUTHE The above n the State	2ND AVE UDERDALE, FL 33304 US e named entity submits this statement for the e of Florida. RE:		gent, or both,
FORT LAU The above n the Stat BIGNATU	2ND AVE JDERDALE, FL 33304 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered A	igent Date	
FORT LAU The above n the State SIGNATU	2ND AVE UDERDALE, FL 33304 US e named entity submits this statement for the e of Florida. RE:		
FORT LAU The above In the State SIGNATU OFFICER Vitte: Vame: Address:	2ND AVE JDERDALE, FL 33304 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered A	igent Date	
FORT LAU The above n the State SIGNATU	2ND AVE JDERDALE, FL 33304 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: D () Delete DEBROSSE, MARTINO REV 1429 N.E. 2ND AVE	ADDITIONS/CHANGES TO OFFICERS ANI Title: () Change () Addition Name: Address:	

I hereby certify that the information supplied with this filing does not qualify 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: MARTINO DEBROSSE 05/16/2009 D