

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002559

FILED  
May 13, 2007  
Secretary of State

**Entity Name:** THE PORTRAIT OF EMPOWERMENT, INC.

**Current Principal Place of Business:**

780 FISHERMAN STE 328  
OPA LOCKA, FL 33054 US

**New Principal Place of Business:**

**Current Mailing Address:**

1372 NW 22 PL  
OPA LOCKA, FL 330544002 US

**New Mailing Address:**

**FEI Number:** 65-0997665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SMITH-JOHNSON, DOROTHY  
13724 NW 22 PLACE  
OPA LOCKA, FL 33054 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: P ( ) Delete  
Name: SMITH-JOHNSON, DOROTHY  
Address: 13724 NW 22 PLACE  
City-St-Zip: OPA LOCKA, FL 33054

Title: SDT ( ) Delete  
Name: LEE, CYNTHIA  
Address: 1334 SW 119 AVE #114  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete  
Name: TOURGEMAN, RACHEL  
Address: 9548 ABBOTT AVE  
City-St-Zip: MIAMI, FL 33154

Title: D ( ) Delete  
Name: RICARRADO, SPENCER  
Address: 11443 HIBBS GROVE DR  
City-St-Zip: FORT LAUDERDALE, FL 333304444

Title: D ( ) Delete  
Name: IRVING, DONALD  
Address: 15105 NW 37 AVE  
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete  
Name: TANG, VENGHAN  
Address: 8401 SW 107 AVENUE #254 E  
City-St-Zip: MIAMI, FL 33173

**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:

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 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: DOROTHY SMITH-JOHNSON

PRES

05/13/2007

Electronic Signature of Signing Officer or Director

Date