

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N00000004888

1. Entity Name
YOUTH EXPRESSIONS, INC.



FILED
Aug 04, 2008 08:00 AM
Secretary of State

Principal Place of Business
7901 NORTHEAST SECOND AVENUE
MIAMI, FL 33138 US

Mailing Address
1000 VENETIAN WAY
904
MIAMI, FL 33139 US



07302008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1024428

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSENFELD, MICHAEL J
3443 LAUREL OAK LANE
604
HOLLYWOOD, FL 33021

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME ROSENFELD, MICHAEL J
STREET ADDRESS 3443 LAUREL OAK LANE, #604
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE T
NAME HERBITS, STEPHEN E
STREET ADDRESS 1000 VENETIAN WAY, 904
CITY-ST-ZIP MIAMI, FL 33139

TITLE D
NAME MARRERO, DESIREE
STREET ADDRESS 5070 SW 62 AVE
CITY-ST-ZIP MIAMI, FL 33155

TITLE D
NAME NORWOOD, CHRISTOPHER M
STREET ADDRESS 1900 BISCAYNE BLVD
CITY-ST-ZIP MIAMI, FL 33132

TITLE D
NAME IEMOLO, MICHELE
STREET ADDRESS 3443 LAUREL OAK LANE
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE D
NAME PIERRE, BARRY
STREET ADDRESS PO BOX 380338
CITY-ST-ZIP MIAMI, FL 33238

U00000957098
08/04/08-80009-008 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MJ MICHAEL J. ROSENFELD

7/30/08 (for) 434-0337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #