

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 13, 2007 8:00 am
Secretary of State

06-13-2007 90004 016 ****70.00

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1. Entity Name
S.T.E.P.S. IN THE RIGHT DIRECTION, INC.



Principal Place of Business
1651 WEST 37TH STREET, STE 406
HIALEAH, FL 33012 US

Mailing Address
P.O. BOX 28112
HIALEAH, FL 33002 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05182007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-1067093

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SALEM, MICHAEL
6363 GAGE PLACE
MIAMI LAKES, FL 33014

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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)

05/30/07 2

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME AQUINO, JOSE ☐ Delete
STREET ADDRESS 6532 N.W. 170 TERRACE
CITY-ST-ZIP MIAMI LAKES, FL 33015

TITLE DT
NAME ACOSTA, ROLANDO ☒ Delete
STREET ADDRESS 1261 WEST 43 PLACE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE D
NAME JEAN BAPTISTE, CHRISTINE ☒ Delete
STREET ADDRESS 920 NW 179 STREET
CITY-ST-ZIP MIAMI, FL 33169

TITLE PD
NAME SALEM, MICHAEL ☐ Delete
STREET ADDRESS 6363 GAGE PLACE
CITY-ST-ZIP MIAMI LAKES, FL 33014

TITLE D
NAME ACOSTA, TERESA ☐ Delete
STREET ADDRESS 1261 WEST 43 PLACE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE DT
NAME HECHAVARRIA, Miguel ☐ Delete
STREET ADDRESS 1651 W 37 STREET #406
CITY-ST-ZIP HIALEAH FL 33014

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME DAVIE MADISON ☐ Change ☒ Addition
STREET ADDRESS 1651 W 37 STREET #406
CITY-ST-ZIP HIALEAH, FL 33012

TITLE D
NAME EBENEZER BOAKYE ☐ Change ☒ Addition
STREET ADDRESS 1651 W. 37 STREET #406
CITY-ST-ZIP HIALEAH, FL 33012

TITLE D
NAME REZA SEVABI ☐ Change ☒ Addition
STREET ADDRESS 1651 W 37 STREET #406
CITY-ST-ZIP HIALEAH, FL 33012

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPE OF OFFICER OR DIRECTOR

5/30/07 (305) 231-9930