2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 27, 2003
Secretary of State

DOCUMENT# N00000008156

Entity Name: SISTERHOOD-NOW AND FOREVER INC.

Current Principal Place of Business:

536 N. BISCAYNE RIVER DR.
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

536 N. BISCAYNE RIVER DR.
MIAMI, FL 33169

New Mailing Address:

P.O. BOX 42202
MIAMI, FL 33242

FEI Number: 65-1129210 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, JOYCE
536 N. BISCAYNE RIVER DR.
MIAMI, FL 33169

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: MCKINNEY, FEBORAH H
Address: 13855 N 5TH COURT
City-St-Zip: MIAMI, FL 33165

Title: VPD ( ) Delete
Name: HUDSON, JOE ANNA
Address: 195 SIERRA DR
City-St-Zip: MIAMI, FL 33169

Title: SD ( ) Delete
Name: JONES, JOYCE
Address: 536 N BISCAYNE RIVER DR
City-St-Zip: MIAMI, FL 33165

Title: TD ( ) Delete
Name: BOWENS, LILLIE
Address: 1254 NW 53 STREET
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: KING, FAYE
Address: 1201 NW 16TH STREET
City-St-Zip: MIAMI, FL 33125

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: HUDSON, ANTIONETTE
Address: 19355 NW 2ND CRT
City-St-Zip: MIAMI, FL 33168

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: FEBORAH MCKINNEY PD 08/27/2003

Electronic Signature of Signing Officer or Director — Date