

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008344

FILED
Apr 27, 2004
Secretary of State**Entity Name:** GIRLS RISING ABOVE COMMON ELEMENTS, INCORPORATED**Current Principal Place of Business:**5937 NW 22 AVE
MIAMI, FL 33142**New Principal Place of Business:****Current Mailing Address:**PO BOX 824461
PEMBROKE PINES, FL 33082**New Mailing Address:****FEI Number:** 65-1089121**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CLARKE, VERONICA P
6431 MAIN STREET
311
MIAMI LAKES, FL 33014 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:** D () Delete
Name: PLAYER, CATHERINE M
Address: 11417 SW 148 TERRACE
City-St-Zip: MIAMI, FL 33176**Title:** P () Delete
Name: CLARKE, VERONICA P
Address: 6431 MAIN STREET, #311
City-St-Zip: MIAMI LAKES, FL 33014**Title:** D () Delete
Name: LONG, JACQUELYN
Address: 2361 LAKE MIRAMAR WAY
City-St-Zip: MIRAMAR, FL 330253840**Title:** D () Delete
Name: LATSON, ANITA
Address: 2355 NW 80 STREET
City-St-Zip: MIAMI, FL 33147**Title:** D () Delete
Name: HILL, MICHELLE
Address: 8285 NW 15 AVENUE
City-St-Zip: MIAMI, FL 33147**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: ROBINSON, CHERYL
Address: 2371 WEST LAKE MIRAMAR CIRCLE
City-St-Zip: MIRAMAR, FL 33025**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 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: VERONICA P. CLARKE

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date