


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # N01000000388 1. Entity Name NEW GENERATION HUMAN SERVICES, INC.	
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Principal Place of Business 85 NE 213TH STREET MIAMI, FL 33179	Mailing Address 85 NE 213TH STREET MIAMI, FL 33179
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DO NOT WRITE IN THIS SPACE



01272004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-1075907	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent THOMAS, RANZER A SR, REV 85 NE 213TH STREET MIAMI, FL 33179
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS, RANZER A SR REV 85 NE 213TH STREET MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HARP, YASHYAWA 21355 NW 9TH COURT MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, EMMANUEL 14795 NE 18TH AVE, APT #115 NORTH MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST THOMAS, RHONDA M 85 NE 213TH STREET MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/16/04-80066-015 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Ranzer A. Thomas Sr.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>Feb 10, 04</u>	Daytime Phone #: <u>305 770-0037</u>
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