


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2005 8:00 am
Secretary of State

07-12-2005 90039 038 ****61.25

DOCUMENT # N01000006047	
1. Entity Name SHARING FOR KIDS, INC.	

Principal Place of Business 4570 NW 93 DORAL COURT MIAMI, FL 33178	Mailing Address 4570 NW 93 DORAL COURT MIAMI, FL 33178
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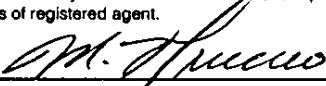
2. Principal Place of Business 3928 Adra Avenue Suite, Apt. #, etc.	3. Mailing Address 3928 Adra Avenue Suite, Apt. #, etc.
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City & State Doral, Florida	City & State Doral, Florida
Zip 33178	Country U.S.A.
Zip 33178	Country

07052005 Chg-NP CR2E037 (10/03)

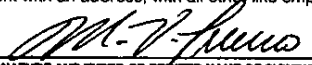
4. FEI Number 65-1136846	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TRUCCO-RUEDA, VICTORIA 4570 NW 93 DORAL COURT MIAMI, FL 33178	
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7. Name and Address of New Registered Agent Name Trucco-Rueda, Victoria Street Address (P.O. Box Number is Not Acceptable) 3928 Adra Avenue City Doral, Florida FL Zip Code 33178	
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 	DATE 7/5/05
(NOTE: Registered Agent signature required when reinstating)	

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TRUCCO-RUEDA, VICTORIA 4570 NW 93 DORAL COURT MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Trucco-Rueda, Victoria 3928 Adra Avenue Doral, FL 33178 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ARISTIZABAL, MONICA 10770 NW 66 ST. #203 MIAMI, FL 33178 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Emiliani, Margarita 7880 SW 86 Street Unit 2 Miami, FL 33143 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MALO-OCHOA, YOLANDA 1052 CREEKFORD DR WESTON, FL 33326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Angulo, Sandra 11405 NW 62 Terrace Apt 238 Doral, FL 33178 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, LEONOR 445 GRAND BAY DR #5017 KEY BISCAINE, FL 33149 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Castellanos, Claudia 10710 NW 66 Street Apt 101 Doral, FL 33178 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CASTELLANOS, CLAUDIA 10730 NW 66 ST #409 MIAMI, FL 33178 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Ouer, Rosmery 12085 NW 135 Terrace Miami, FL 33186 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Maria Victoria Trucco	DATE 7/5/05 305-525-4671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	