

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007036

FILED
Apr 27, 2005
Secretary of State

Entity Name: CHILDREN'S SUPPORT NETWORK, INC.

Current Principal Place of Business:

8000 S.W. 138 ST
MIAMI, FL 33158

New Principal Place of Business:

8000 S.W. 138 ST
PALMETTO BAY, FL 33158

Current Mailing Address:

PO BOX 560281
MIAMI, FL 332560281

New Mailing Address:

PO BOX 560644
MIAMI, FL 332560644

FEI Number: 65-1159240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERSTEIN, LIANA M
8000 S.W. 138 ST
MIAMI, FL 33158 US

Name and Address of New Registered Agent:

SILVERSTEIN, LIANA M
8000 S.W. 138 ST
PALMETTO BAY, FL 33158 US

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:

04/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SILVERSTEIN, LIANA M
Address: 8000 S.W. 138 ST
City-St-Zip: MIAMI, FL 33158

Title: DS/T () Delete
Name: LOPEZ, NESTOR E
Address: 4431 S.W. 134 CT
City-St-Zip: MIAMI, FL 33175

Title: DVP () Delete
Name: CRUZ, ROSARIO
Address: 861 EAST 15 PLACE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SILVERSTEIN, LIANA M
Address: 8000 S.W. 138 ST
City-St-Zip: PALMETTO BAY, FL 33158

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: LIANA SILVERSTEIN

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date