

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002963

FILED
Apr 29, 2004
Secretary of State**Entity Name:** VOIX LA TORTUE NONPROFIT ORGANIZATION, INC.**Current Principal Place of Business:**12815 N.E. 11TH AVENUE
NORTH MIAMI, FL 33161**New Principal Place of Business:****Current Mailing Address:**12815 N.E. 11TH AVENUE
NORTH MIAMI, FL 33161**New Mailing Address:****FEI Number:** 02-0554605**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LOUIS-JEUNE, ACOI
12815 N.E. 11TH AVENUE
NORTH MIAMI, FL 33161 US**Name and Address of New Registered Agent:**LOUIS-JEUNE, ACIO
12815 N.E. 11TH AVENUE
NORTH MIAMI, FL 33161 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: ACIO LOUIS-JEUNE

04/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOUIS-JEUNE, ACOI
Address: 12815 N.E. 11TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD () Delete
Name: CHERIZOL, MARIE
Address: 16931 N.E. 6TH AVENUE
City-St-Zip: NORTH MIAMI, FL

Title: STD () Delete
Name: LOUIS JEUNE, THALERAND
Address: 17860 N.E. 13TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL

Title: D (X) Delete
Name: LOUIS-JEUNE, GUERRY
Address: 2917 NW 48TH STREET
City-St-Zip: TAMARAC, FL 33309

Title: D (X) Delete
Name: PIERRE, DANIEL
Address: 15240 NE 10TH CT.
City-St-Zip: MIAMI, FL 33162

Title: D (X) Delete
Name: POLYDOR, WALTA
Address: 1340 NE 129TH STREET
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOUIS-JEUNE, ACIO
Address: 12815 N.E. 11TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

Title: S (X) Change () Addition
Name: CHESTER-FOLKES, NORMA
Address: 11100 SW 197 STREET
City-St-Zip: MIAMI, FL 33157

Title: TR (X) Change () Addition
Name: LOUIS-JEUNE, GUERRY
Address: 2917 NW 48 STREET
City-St-Zip: TAMARAC, FL

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

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: ACIO LOUIS-JEUNE

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date