2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004110

FILED Apr 29, 2005 Secretary of State

Entity Name: DADE CHILDREN AND FAMILY MOBILIZATION SERVICES INC.

Current Principal Place of Business: New Principal Place of Business: 12936 SW 133COURT MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** 19234 NW 80TH COURT 17355 SW 33RD COURT MIAMI, FL 33015 MIRAMAR, FL 33029 FEI Number: 32-0020419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: EZEWIKE, FIDELIS I EZEWIKE, FIDELIS I 19234 NW 80TH COURT 17355 SW 33RD COURT MIAMI, FL 33015 MIRAMAR, FL 33029 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: FIDELIS EZEWIKE 04/29/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition EZEWIKE, FIDELIS I Name: Name: Address: 19234 NW 80TH COURT Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: () Delete Title: () Change () Addition EZEWIKE, VERONICA I Name: Name: Address: 19234 NW 80TH COURT Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: () Delete Title: () Change () Addition WILSON, THERESA Name: Name: 18623 NW 63RD COURT Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: () Delete Title: () Change () Addition OFFOR, PAULETTE Name: Name: 18111 NW 68TH AVENUE #H210 Address: Address: City-St-Zip: MIAMI, FL 33015 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: FIDELIS EZEWIKE P 04/29/2005