


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 17, 2006 8:00 am Secretary of State

07-17-2006 90137 034 ****61.25

DOCUMENT # N02000008012			
1. Entity Name WE ARE ALL FAMILY, INC.			
Principal Place of Business 6330 SW 44 ST MIAMI, FL 33155		Mailing Address 4692 NW 183RD ST. MIAMI GARDENS, FL 33055	
2. Principal Place of Business 4692 NW 183rd St		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State Miami Gardens FL		City & State	
Zip 33055		Country USA	
4. FEI Number		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCIA, MARIH-CHE 6330 SW 44 ST MIAMI, FL 33155		7. Name and Address of New Registered Agent Name: GARCIA MARIH-CHE Street Address (F.O. Box Number is Not Acceptable) 4692 NW 183rd St City: Miami Gardens FL Zip Code: 33055	
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: <i>Mariche Garcia Pres.</i> DATE: <i>July 12, 2006</i>			
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '06	
TITLE NAME PSTD GARCIA, MARIH-CHE	STREET ADDRESS 6330 SW 44 ST	CITY- ST- ZIP MIAMI, FL 33155	TITLE NAME PSTD GARCIA MARIH-CHE
STREET ADDRESS 6330 SW 44 ST	CITY- ST- ZIP MIAMI, FL 33155	TITLE NAME PSTD GARCIA MARIH-CHE	STREET ADDRESS 4692 NW 183rd St
CITY- ST- ZIP MIAMI, FL 33155		CITY- ST- ZIP Miami Gardens FL 33055	
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CITY- ST- ZIP MIAMI, FL 33155		CITY- ST- ZIP Miami Gardens FL 33055	
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STREET ADDRESS 6330 SW 44 ST	CITY- ST- ZIP MIAMI, FL 33155	TITLE NAME GARCIA MARIH-CHE	STREET ADDRESS 4692 NW 183rd St
CITY- ST- ZIP MIAMI, FL 33155		CITY- ST- ZIP Miami Gardens FL 33055	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Mariche Garcia Marih-Che Garcia</i>		DATE: <i>7/12/06 (305) 441-2606</i>	