

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Feb 14, 2006
Secretary of State**

DOCUMENT# N02000008565

Entity Name: MIAMI DADE COMMUNITY SERVICES, INC.

Current Principal Place of Business:1901 SW FIRST STREET SECOND FLOOR
MIAMI, FL 33135**New Principal Place of Business:****Current Mailing Address:**1901 SW FIRST STREET SECOND FLOOR
MIAMI, FL 33135**New Mailing Address:**

FEI Number: 82-0583109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:PEREZ, REINA M
1901 NW FIRST STREET SECOND FLOOR
MIAMI, FL 33135 US**Name and Address of New Registered Agent:**ROIG, JOSE M
1901 NW FIRST STREET SECOND FLOOR
MIAMI, FL 33135 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: JOSE M ROIG

02/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: PEREZ, REINA M
Address: 1901 SW FIRST STREET SECOND FLOOR
City-St-Zip: MIAMI, FL 33135Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: ROIG, JOSE M
Address: 1901 SW FIRST STREET SECOND FLOOR
City-St-Zip: MIAMI, FL 33135Title: DS () Change (X) Addition
Name: SOSA, YOLANDA
Address: 1340 LINCOLN RD #403
City-St-Zip: MIAMI BEACH, FL 33139Title: DT () Change (X) Addition
Name: ALFONSO, ROGELIO
Address: 5425 SW 11 AVE
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MIKE M ROIG

PD

02/14/2006

Electronic Signature of Signing Officer or Director

Date