2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0300000037

FILED Apr 26, 2007 Secretary of State

Entity Name: HOLLYWOOD, FLORIDA SISTER CITIES INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: C/O KEITH WASSERSTROM, ESQ. C/O MAYRA F. HERNANDEZ 1909 TYLER ST. PH 2624 ARTHUR STREET HOLLYWOOD, FL 330200000 HOLLYWOOD, FL 330200000 **Current Mailing Address:** New Mailing Address: C/O MAYRA F. HERNANDEZ C/O KEITH WASSERSTROM, ESQ. 2624 ARTHUR STREET 1909 TYLER ST. PH HOLLYWOOD, FL 330200000 HOLLYWOOD, FL 330200000 FEI Number: 54-2091332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WASSERSTROM, KEITH HERNANDEZ, MAYRA F PD 1909 TYLER STREET, PH 2624 ARTHUR STREET HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 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: MAYRA F. HERNANDEZ 04/26/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CHAIS, SHERRY Name: Name: 20135 NE 25 CT. Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: PD () Delete Title: () Change () Addition HERNANDEZ, MAYRA Name: Name: Address: 2624 ARTHUR ST. Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ, PETER Name: Name: Address: 2639 MONROE ST. Address: City-St-Zip: HOLLYWOOD, FL 330204617 City-St-Zip: Title: () Delete Title: () Change () Addition Name: EDWARDS, JAMES Name: Address: 330 NORTH FEDERAL HWY. Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MAYRA F. HERNANDEZ PD 04/26/2007