## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## May 02, 2005 08:00 AM **Secretary of State** DOCUMENT # N03000001126 TAMÉLA'S ACHIEVERS OF EXCELLENCE, INC. Principal Place of Business Mailing Address 2861 NW 184TH STREET 2861 NW 184TH STREET MIAMI, FL 33056 MIAMI, FL 33056 01102005 No Chg-NP CR2E037 (10/03) Applied For 4. FEi Number 03-0506034 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BURGESS, PAMELA DO NOT WRITE 2861 NW 184TH STREET MIAMI, FL 33056 IN THIS SPACE 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. (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be Added to Fees 9. Election Campaign Financing Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2005 10. OFFICERS AND DIRECTORS TITLE NAME BURGESS, TAMELA الْكُولُ الْمُسْلِحُ مِنْ اللَّهِ اللَّهِ مِنْ اللَّهِينَامِ مِنْ اللَّهِ مِنْ اللّ STREET ADDRESS **2861 NW 184TH STREET** ~~~ U00000358694 CITY-ST-ZIP MIAMI, FL 33056 TITLE NAME TRIBBLE, JEANETTE STREET ADDRESS 12001 SW 213TH STREET CITY-ST-ZIP MIAMI, FL 33177 TITLE NAME WALTON, EUGENE STREET ADDRESS 941 VALENCIA AVE. DO NOT WRITE City-St-7IP DAYTONA BEACH, FL 32114 IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

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