2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N03000001781

Entity Name: THE MIAMI LAKES ELEMENTARY ASSISTANTS TO CLASSROOM TEACHERS FUND, INC.

Current Principal Place of Business:

16424 STONEHAVEN RD.
MIAMI LAKES, FL 33014

New Principal Place of Business:

14250 NW 67TH AVENUE
MIAMI LAKES, FL 33014 US

Current Mailing Address:

16424 STONEHAVEN RD.
MIAMI LAKES, FL 33014

New Mailing Address:

14250 NW 67TH AVENUE
MIAMI LAKES, FL 33014

FEI Number: 56-2344590 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANFREDIZ, HENRY
14250 NW 67TH AVE.
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MANFREDIZ, HENRY
Address: 6612 MIAMI LAKES DR. E.
City-St-Zip: MIAMI LAKES, FL 33014

Title: D (X) Delete
Name: ALBERT, JULIE
Address: 14410 CEDAR CT.
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete
Name: BERRIOS, SUZANNE
Address: 14831 PALMETTO PALM AVE.
City-St-Zip: MIAMI LAKES, FL 33014

Title: D (X) Delete
Name: O'NEILL, SUSAN
Address: 8450 MENTEITH TERRACE
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: HENRY MANFREDIZ D 04/28/2004
Electronic Signature of Signing Officer or Director — Date