

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003096

FILED
Apr 12, 2006
Secretary of State

Entity Name: HORIZONS AGRICULTURAL CENTER, INC.

Current Principal Place of Business:

15965 SW 66 TERRACE
MIAMI, FL 33193

New Principal Place of Business:

1541 NE 14 ST
HOMESTEAD, FL 33033

Current Mailing Address:

15965 SW 66TH TERRACE
MIAMI, FL 33193

New Mailing Address:

1541 NE 14 ST
HOMESTEAD, FL 33033

FEI Number: 33-1070138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMENGOR, CULHAM B
15965 SW 66TH TERRACE
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

AMENGOR, CULHAM B
1541 NE 14 ST
HOMESTEAD, FL 33033 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:

04/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVSD () Delete
Name: AMENGOR, CULHAM B
Address: 15965 SW 66TH TERRACE
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: SCHLACTERMAN, MICKEY
Address: 13135 SW 107TH STREET
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: LEDESMA, CARMEN
Address: 7316 SW 158TH AVENUE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD (X) Change () Addition
Name: AMENGOR, CULHAM B
Address: 1541 NE 14 ST
City-St-Zip: HOMESTEAD, FL 33033

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 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: CULHAM AMENGOR

D

04/12/2006

Electronic Signature of Signing Officer or Director

Date