

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003294

FILED  
Sep 02, 2007  
Secretary of State

**Entity Name:** AJDM YOUTH ASSOCIATION FOR THE DEVELOPMENT OF MIRAGOANE (BELLE RIVIERE), INC.

**Current Principal Place of Business:**

19254 SW 122 CT  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

19254 SW 122 CT  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 59-3771815      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

DELIMA-LUCIEN, WANDRA  
19254 SW 122 CT  
MIAMI, FL 33177      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: DELIMA-LUCIEN, WANDRA  
Address: 19254 SW 122 CT  
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete  
Name: LAURAT, LIONEL  
Address: 730 NE 162 ST  
City-St-Zip: MIAMI, FL 33162

Title: D ( ) Delete  
Name: DUMAS, ETIENE  
Address: 895 NW 147 ST  
City-St-Zip: MIAMI, FL 33168

**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:

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: WANDRA DELIMA-LUCIEN

D

09/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date