2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004
Secretary of State

DOCUMENT# N03000004113

Entity Name: SPARE CHANGE OYC, INC.

Current Principal Place of Business:

2238 S MIAMI AVE
MIAMI, FL 331291521

New Principal Place of Business:

Current Mailing Address:

2238 S MIAMI AVE
MIAMI, FL 331291521

New Mailing Address:

FEI Number: 04-3767420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UDOBONG, EDNA
2238 S MIAMI AVE
MIAMI, FL 331291521

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: PD ( ) Delete
Name: NWADIKE, NAOMI A
Address: 2238 S MIAMI AVE
City-St-Zip: MIAMI, FL 331291521

Title: VD ( ) Delete
Name: ORJI, EUGENIA E
Address: 11112 SW 129 PL
City-St-Zip: MIAMI, FL 33186

Title: GSD ( ) Delete
Name: OKORO, EUGENIA E
Address: 135 NW 163 ST
City-St-Zip: MIAMI, FL 33169

Title: ASD ( ) Delete
Name: EZEWIKE, IJEOMA
Address: 19234 NW 80 CT
City-St-Zip: MIAMI, FL 33015

Title: TD ( ) Delete
Name: OKORO, THERESA N
Address: 135 NW 163 ST
City-St-Zip: MIAMI, FL 33169

Title: FSD ( ) Delete
Name: NWAHIRI, JULIET C
Address: 20140 NW 57 CT
City-St-Zip: MIAMI, FL 33015

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:

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: NWADIKE NAOMI PD 05/04/2004

Electronic Signature of Signing Officer or Director — Date