

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006963

Entity Name: POSITIVE START, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

6604 SW 33RD STREET
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6604 SW 33RD STREET
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 16-1680277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, SHERMAN P
6604 SW 33RD STREET
MIRAMAR, FL 33023 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: PD () Delete
Name: BROWN, SHERMAN
Address: 6604 SW 33RD STREET
City-St-Zip: MIRAMAR, FL 33023

Title: TD () Delete
Name: LEE, CLARISSA
Address: 905 NORTH 13TH COURT
City-St-Zip: HOLLYWOOD, FL 33019

Title: SD () Delete
Name: KING, JIM
Address: 10974 SW 158TH TERRACE
City-St-Zip: MIAMI, FL 33157

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 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: SHERMAN BROWN

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date