

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006963

FILED
Apr 27, 2006
Secretary of State

Entity Name: POSITIVE START, INC.

Current Principal Place of Business:

915 NE 125TH STREET
SUITE #310-B
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

915 NE 125TH STREET
SUITE #310
NORTH MIAMI, FL 33161

New Mailing Address:

915 NE 125TH STREET
SUITE #310-B
NORTH MIAMI, FL 33161

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
915 NE 125TH STREET
SUITE #310
NORTH MIAMI, FL 33161 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: 915 NE 125TH #310-B
City-St-Zip: NORTH MIAMI, FL 33161

Title: TD () Delete
Name: LEE, CLARISSA
Address: 20025 NE 3RD COURT #6
City-St-Zip: MIAMI, FL 33179

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

Title: D () Delete
Name: MONROE, WANDA
Address: 16020 NW 37TH COURT
City-St-Zip: MIAMI GARDENS, FL 33054

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 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: SHERMAN BROWN

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date