

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009499

FILED
May 01, 2006
Secretary of State

Entity Name: UNIVERSAL YOUTH IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

214 NW 74 STREET APT 1
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

214 NW 74 STREET APT 1
MIAMI, FL 33150

New Mailing Address:

FEI Number: 30-0224939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

PIERRE, JUNIOR
214 NW 74 STREET APT 1
MIAMI, FL 33150 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: PIERRE, JUNIOR
Address: 214 NW 74 STREET APT 1
City-St-Zip: MIAMI, FL 33150

Title: VD () Delete
Name: LECORPS, YOLANDE
Address: 214 NW 74 STREET APT 1
City-St-Zip: MIAMI, FL 33150

Title: SD () Delete
Name: MONISE, AIME
Address: 214 NW 74 STREET APT 1
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PIERRE, JUNIOR
Address: 942 NW 101 STREET
City-St-Zip: MIAMI, FL 33150

Title: VD (X) Change () Addition
Name: LECORPS, YOLANDE
Address: 942 NW 101 STREET
City-St-Zip: MIAMI, FL 33150

Title: SD (X) Change () Addition
Name: MONISE, AIME
Address: 942 NW 101 STREET
City-St-Zip: MIAMI, FL 33150

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: JUNIOR PIERRE

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date