2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010381

Entity Name: MIAMI YOUTH COMMUNITY FOUNDATION, INC.

FILED Apr 07, 2004 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
	52ND TERRA			633 NE 167TH STREET 622 NORTH MIAMI BEACH, FL 33162		
NORTHIM	IIAMI BEACH, I	FL 33162				
Current M	lailing Addres	ss:	New Mail	New Mailing Address:		
1020 NE 152ND TERRACE NORTH MIAMI BEACH, FL 33162				P.O. BO 601575 NORTH MIAMI BEACH, FL 33160		
FEI Number: 73-1684183 FEI Number Applied For () FEI N			FEI Number Not App	Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	d Address of	New Registered Agent:	
1020 NË 1 NORTH M	FRANDLEY 52ND TERRA IIAMI BEACH, I	FL 33162 US				
	named entity : e of Florida.	submits this statement for the pur	pose of changing	its registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Agent	t		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DEFILIE, FRAN 1020 NE 152NI	Delete IDLEY OFFICER DITERRACE BEACH, FL 33162	Title: Name: Address: City-St-Zip:	DEFILIE, FRA 1020 NE 152N		
Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	BAREFIELD,	LD LAKE DRIVE	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	S/D (MAHER, CES: 6036 SW 27T MIRAMAR, FL	H STREET	
Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	BAREFIELD,	LD LAKE DRIVE	
Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	CR/D (FLYNN, KEEF 910 NE 154TH MIAMI, FL 33	H STREET	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	D (RENE, CLAIR 20810 NE 8TH MIAMI, FL 33	I COURT	

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: FRANDLEY L. DEFILIE P/D 04/07/2004

VOLTAIRE, WIZINSKY, D 320 NW 129TH STREET NORTH MIAMI, FL, 33168

JEAN, MARIA THAMARAH, D 227 NE 141STREET NORTH MIAMI, FL, 33161

MAHER, JAMES, D 6036 SW 26TH STREET MIRAMAR, FL, 33023