

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010961

FILED
Jul 31, 2007
Secretary of State

Entity Name: SUPA FRIENDS, INC.

Current Principal Place of Business:

850 IVES DAIRY
T57 PMB 511
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

850 IVES DAIRY
T57 PMB 511
MIAMI, FL 33179

New Mailing Address:

20730 NE 8TH CT.
203
MIAMI, FL 33179 US

FEI Number: 20-1324016 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

GAY, JOHN
3021 NW 183RD ST
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

DOUCET, CINDY
20730 NE 8TH CT.
MIAMI, FL 33179 US

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: CINDY DOUCET

07/31/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DOUCET, CINDY
Address: 850 IVES DAIRY, T57 PMB 511
City-St-Zip: MIAMI, FL 33179

Title: DV () Delete
Name: DOUCET-BROWN, DENISE
Address: 850 IVES DAIRY, T57 PMB 511
City-St-Zip: MIAMI, FL 33179

Title: DS () Delete
Name: JOSEPH, MARJORIE
Address: 850 IVES DAIRY, T57 PMB 511
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DOUCET, CINDY
Address: 20730 NE 8TH CT. #203
City-St-Zip: MIAMI, FL 33179

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 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: CINDY DOUCET

DP

07/31/2007

Electronic Signature of Signing Officer or Director

Date