2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 27, 2008
Secretary of State

DOCUMENT# N03226

Entity Name: BETTER WAY OF MIAMI, INC.

Current Principal Place of Business:

800 NW 28 STREET
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

800 NW 28 STREET
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-2462933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANG. BETH
% BETTER WAY
800 NW 28 ST
MIAMI, FL 33127 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:	VPD	( ) Delete
Name:	MOLANS, HEATHER	
Address:	16100 SW 173 AVENUE	
City-St-Zip:	MIAMI, FL 33187	
Title:	PD	( ) Delete
Name:	SALLIOU, CHARLES	
Address:	780 NE 69TH STREET 3801	
City-St-Zip:	MIAMI, FL 33138	
Title:	SD	( ) Delete
Name:	WHITEHEAD, LINDA	
Address:	1801 NW 9 AVENUE	
City-St-Zip:	MIAMI, FL 33136	
Title:	TD	( ) Delete
Name:	MARI, MARIA C	
Address:	9515 S.W. 136 STREET	
City-St-Zip:	MIAMI, FL 33176	
Title:	D	(X) Delete
Name:	LANG, BETH	
Address:	10901 NORTH BAY SHORE DRIVE	
City-St-Zip:	MIAMI, FL 33161	
Title:	D	(X) Delete
Name:	ALVAREZ, GREGORY	
Address:	235 WASHINGTON AVENUE	
City-St-Zip:	MIAMI BEACH, FL 33139	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	LANG, BETH	
Address:	10901 NORTH BAY SHORE DRIVE	
City-St-Zip:	MIAMI, FL 33161	
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 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: BETH LANG D 08/27/2008

Electronic Signature of Signing Officer or Director — Date