2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001176

FILED Jan 04, 2006 Secretary of State

Entity Name: THE NATIONAL DRUG FREE YOUTH FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12973 SW 112 STREET 12973 SW 112 STREET

225 #225

MIAMI, FL 33186 MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

12973 SW 112 STREET MIAMI, FL 33186

OFFICERS AND DIRECTORS:

FEI Number: 20-0791299 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NATIONAL DRUG FREE YOUTH FOUNDATION

12973 SW 112 STREET

NATIONAL DRUG FREE YOUTH FOUNDATION
12973 SW 112 STREET

225 #225 MIAMI, FL 33145 US 12973 SW 112 STREE

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: 01/04/2006

Electronic Signature of Registered Agent Date

Electronic dignature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change() Addition

 Name:
 NASSAR, GAMAEL
 Name:
 NASSAR, GAMAEL

 Address:
 12973 SW 112 STREET
 Address:
 12973 SW 112 STREET #225

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: DV () Delete Title: DV (X) Change () Addition

Name: LOUIS, JOSEPH Name: LOUIS, JOSEPH

Title: DS () Delete Title: DS (X) Change () Addition Name: ALLAN, YANICK Name: ALLAN, YANICK

Address: 12973 SW 112 STREET #225

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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: GAMAEL NASSAR DP 01/04/2006