2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N04000002716

Entity Name: AFRICAN CULTURAL COALITION, INC.

Current Principal Place of Business:

3341 N UNIVERSITY DRIVE
SUITE 2
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

P. O. BOX 490014
FT LAUDERDALE, FL 33349 US

Current Mailing Address:

3341 N UNIVERSITY DR
SUITE 2
HOLLYWOOD, FL 33024 US

New Mailing Address:

P.O. BOX 490014
FT LAUDERDALE, FL 33349 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

VASSALL, KWADWO
3341 N UNIVERSITY DR
SUITE 2
HOLLYWOOD, FL 33024 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: D ( ) Delete
Name: VASSALL, KWADWO
Address: 3341 N UNIVERSITY DR
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: D ( ) Delete
Name: LYDIA, EDELL JR.
Address: 3341 N UNIVERSITY DR
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: D ( ) Delete
Name: CHIN QUEE, PHILLIP
Address: 3341 N UNIVERSITY
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: S ( ) Delete
Name: GILCHRIST, NYOKA
Address: 3341 N UNIVERSITY DR
City-St-Zip: HOLLYWOOD, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: LYDIA, EDELL JR.
Address: P. O. BOX 490014
City-St-Zip: FT LAUDERDALE, FL 33349 US

Title: D (X) Change ( ) Addition
Name: AGYEMAN, KOFI
Address: 3341 N UNIVERSITY
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: S (X) Change ( ) Addition
Name: SAMUELS, AKUA
Address: 3341 N UNIVERSITY DR
City-St-Zip: HOLLYWOOD, FL 33024 US

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: KWADWO VASSALL D 05/01/2007
Electronic Signature of Signing Officer or Director — Date