## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 19, 2007 8:00 am Secretary of State

1. Entity Name	# N04000032	• •	c		04-19-2007 90192	031 ****61.25
Principal Place of Busines: 650 NE 64TH ST MIAMI, FL 33138	S	Mailing Address 703 NE 63RD ST MIAMI, FL 33138		400694	144 market	361.
2. Principal Place of Busin	ness - No P.O. Box # 3	3. Mailing Address	·			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01312007 CI	ng-NP CR2E0	37 (12/06)
City & State		City & State	<del>.</del>	4. FEI Number 20-093739	 1	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Additional Fee Required
6. Name	and Address of Current Reg	gistered Agent		7. Name and Add	ress of New Registered	Agent
COHEN, AARON			Name			
150 EAST PALMET	TO PARK ROAD		Street Addr	Street Address (P.O. Box Number is Not Acceptable)		
SUITE 110 33432, FL 33137						
5070£, 1			City		FL	Zip Code
	y submits this statement for the	e purpose of changing its	s registered office or reg	gistered agent, or both, in		
the obligations of regis			s registered office or reg			
SIGNATURE Signature, types	tered agent.	title if applicable. (NO1		equired when reinstating)	the State of Florida. I am  DATE	
SIGNATURE  Signature. types  Filling Fe Due by fill.	or printed name of registered agent and the Es \$61.25	ititle if applicable. (NOI	TE: Registered Agent signature re impaign Financing Contribution.	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG	the State of Florida. I am  DATE	familiar with, and accept
SIGNATURE SIGNATURE Filling Fe Due by fill  10.	or printed name of registered agent and the is \$61.25 Aug 1, 2007  OFFICERS AND DIRECT	ititle of applicable. (NOI  9 Electricon Ca  Trust Fund	TE: Registered Agent signature in impelign Financing Contribution.	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG	DATE  Make chec Florida Depai	familiar with, and accept
SIGNATURE  SIGNATURE  SIgnature. typec  Filling Fe Due by ft  10.  IITLE  NAME  STREET ADDRESS  650 NOR	or printed name of registered agent and the is \$61.25  Asy 1, 2007  OFFICERS AND DIRECT PENCE THEAST 61ST STREET SI	9Election Ce Trust Fund	TE: Registered Agent signature in impelign Financing Contribution.	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG	DATE  Make chec Florida Depai ES TO OFFICERS AND Di	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change
SIGNATURE  SIGNATURE  SIgnature. typec  Fitting Fe Due by ft  10.  IITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE V NAME STREET ADDRESS GOATEL, STREET ADDRESS 650 NOR	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT	9Election Ce Trust Fund CTORS Delete	TE: Registered Agent signature re repaign Financing Contribution.  11.  ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept
the obligations of regist  SIGNATURE  SIGNATURE  Filing Fe Due by M  10.  TITLE P LEVY, SF 650 NOR CITY-ST-ZIP MIAMI, FI  TIME STREET ADDRESS 650 NOR GOATEL, STREET ADDRESS 650 NOR GOATEL, STREET ADDRESS 650 NOR MIAMI, FI	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT	Trust Fund  Trust Fund  Delete  UITE GPH3  TE G208	TE: Registered Agent signature re Impaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN H ST Mic	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition
SIGNATURE  SIGNATURE  SIgnature. typec  Fitting Fe Due by ft  10.  IITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE V NAME STREET ADDRESS GOATEL, STREET ADDRESS 650 NOR	or printed name of registered agent and the is \$61.25 Aay 1, 2007  OFFICERS AND DIRECT STREET STAND AND AND AND AND AND AND AND AND AND	9Election Ce Trust Fund CTORS Delete	TE: Registered Agent signature re repaign Financing Contribution.  11.  ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition
THE OBLIGATIONS OF REGIST  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  FITTING  FOR Due by R  10.  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  TITLE  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  TITLE  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  TITLE  ST  NAME  STREET ADDRESS  650 NOR  CURRAN  STREET ADDRESS  650 NOR	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT L 33137  I, TIM THEAST 64 STREET SUIT	OTORS  Delete  TE G208	TE: Registered Agent signature re Impaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition
THE OBLIGATIONS OF REGIST  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  Filling Fe Due by R  10.  IITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  TITLE  ST NAME  CURRAN	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT L 33137  I, TIM THEAST 64 STREET SUIT	TE G502	TE: Registered Agent signature re Impaign Financing Contribution.  11.  ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition
THE ODDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE NAME	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT L 33137  I, TIM THEAST 64 STREET SUIT	OTORS  Delete  TE G208	TE: Registered Agent signalure re Impaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition
THE OBLIGATIONS OF REGIST  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  Filing Fe Due by R  10.  IITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FI  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT L 33137  I, TIM THEAST 64 STREET SUIT	TE G502	TE: Registered Agent signalure re Impaign Financing Contribution.  11.  ITILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition
THE ODDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE ST CURRAN STREET ADDRESS CITY-ST-ZIP MIAMI, FI  TITLE NAME	or printed name of registered agent and the is \$61.25  PENCE THEAST 61ST STREET SILL 33138  MAT THEAST 64 STREET SIUT L 33137  I, TIM THEAST 64 STREET SUIT	TE G502	TE: Registered Agent signalure re Impaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	*\$5:00 May Be Added to Fees  ADDITIONS/CHANG SECTIVESS. Laudia F. 50 N.E. 6	DATE  Make chec Florida Depai ES TO OFFICERS AND DI BORDEN GUST Mice Tuarbe	familiar with, and accept  the payable to rement of State  IRECTORS IN 10  Change Addition  Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

2/20/67 Date 756-512-826 Davime Phone #

Addition

☐ Change