2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005
Secretary of State

DOCUMENT# N04000004570

Entity Name: TOTAL ENRICHMENT CORPORATION

Current Principal Place of Business:

6102 SOUTHWEST 68 STREET
SOUTH MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

6102 SOUTHWEST 68 STREET
SOUTH MIAMI, FL 33143

New Mailing Address:

FEI Number: 74-3125811 **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:

WELLS, SHAWNTE L
6102 SW 68 ST
SOUTH MIAMI, FL 33143 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:	PD	( ) Delete
Name:	WELLS, SHAWNTE L	
Address:	6102 SOUTHWEST 68 STREET	
City-St-Zip:	SOUTH MIAMI, FL 33143	
Title:	D	( ) Delete
Name:	RILEY, JOSEPH SR.	
Address:	7900 NORTHWEST 27AVENUE SUITE 238	
City-St-Zip:	MIAMI, FL 33147	
Title:	D	( ) Delete
Name:	WOODS, SOINCERAE	
Address:	17520 NORTHWEST 42COURT	
City-St-Zip:	MIAMI, FL 33055	
Title:	D	( ) Delete
Name:	JELKS, KHALIA	
Address:	1801 SOUTHWEST 102TERRACE	
City-St-Zip:	MIRAMAR, FL 33025	
Title:	D	( ) Delete
Name:	LATTY, NICOLE	
Address:	40 NORTHWEST 120TERRACE	
City-St-Zip:	MIAMI, FL 33168	
Title:	D	( ) Delete
Name:	LEWIS, YOLANDA	
Address:	3921SOUTHWEST 186 AVENUE	
City-St-Zip:	MIRAMAR, FL 33029	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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 for the exemption stated in Section 119.07(3)(i), 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: SHAWNTE WELLS PD 05/05/2005

Electronic Signature of Signing Officer or Director — Date