

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004570

FILED  
May 01, 2006  
Secretary of State

**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:**

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

WELLS, SHAWNTE L  
6102 SW 68 ST  
SOUTH MIAMI, FL 33143      US

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      (X) Delete  
Name: RILEY, JOSEPH SR.  
Address: 7900 NORTHWEST 27 AVENUE SUITE 238  
City-St-Zip: MIAMI, FL 33147

Title: D      (X) Delete  
Name: WOODS, SOINCERAE  
Address: 17520 NORTHWEST 42 COURT  
City-St-Zip: MIAMI, FL 33055

Title: D      ( ) Delete  
Name: JELKS, KHALIA  
Address: 1801 SOUTHWEST 102 TERRACE  
City-St-Zip: MIRAMAR, FL 33025

Title: D      ( ) Delete  
Name: LATTY, NICOLE  
Address: 40 NORTHWEST 120 TERRACE  
City-St-Zip: MIAMI, FL 33168

Title: D      (X) Delete  
Name: LEWIS, YOLANDA  
Address: 3921 SOUTHWEST 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: D      (X) Change ( ) Addition  
Name: GRAY, KHALIA  
Address: 1801 SOUTHWEST 102 TERRACE  
City-St-Zip: MIRAMAR, FL 33025

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 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: SHAWNTE WELLS

PD

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date