## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004814

Entity Name: AFRIKAN VIOLETZ, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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PO BOX 970209 PO BOX 924700

MIAMI, FL 33197 PRINCETON, FL 33092

Current Mailing Address: New Mailing Address:

PO BOX 970209 PO BOX 924700

MIAMI, FL 33197 PRINCETON, FL 33092

FEI Number: 35-2232668 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:

MCCARTNEY-DONALDSON, EFFIE ESQ 444 BRICKELL #51107 MIAMI, FL 33131 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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MOORE, ANITA D
 Name:
 MOORE, ANITA D

 Address:
 21975 SW 104 COURT #106
 Address:
 12722 SW 265 STREET

 City-St-Zip:
 MIAMI, FL 33190
 City-St-Zip:
 MIAMI, FL 33032

Title: S () Delete Title: () Change () Addition

 Name:
 BERRIOS, LIZETTE
 Name:

 Address:
 11230 SW 164 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:

Title: V ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MERRELL, VÁLERIA
 Name:

 Address:
 14091 SW 154 CT
 Address:

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

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HARRINGTON, OLIVIA S
 Name:

 Address:
 26710 SW 137 COURT
 Address:

 City-St-Zip:
 NARANJA, FL 33032
 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: ANITA MOORE PRES 04/25/2005