2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008210

Address:

City-St-Zip:

2521 SW 11 ST

BOYNTON BEACH, FL 33426

FILED May 01, 2007 Secretary of State

Entity Nar	me: SACRED JOY INC			
Current Principal Place of Business:		New Principal P	New Principal Place of Business:	
C/O KRISA 2330 SW 2 MIAMI, FL				
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
C/O KRISA 2330 SW 2 MIAMI, FL				
In accordan	: 20-3090191 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation di	· · · · · · · · · · · · · · · · · · ·		
Name and	Address of Current Registered Agent	Name and Addre	ess of New Registered Agent:	
420 S. DIX 2B CORAL GA The above	BUSINESS SERVICES IE HWY ABLES, FL 33146 US named entity submits this statement for the of Florida.	ne purpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	SE.			
Electronic Signature of Registered Age		Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DIR () Delete DINNAN, KOKIE 309 SE 34TH AVE BOYNTON BEACH, FL 33435 DIR () Delete GILL, REV'D CYNTHIA E M. DIV	Title: Name: Address: City-St-Zip: Title: Name:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip:	704 NE 15TH AVE FT LAUDERDALE, FL 33304	Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	DIR () Delete LAMBERTI, KRISAN 2330 SW 27TH TERR FLORIDA, FL 33133	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DIR () Delete TOPI, MICHELLE M.M. DIV	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: KOKIE DINNAN 05/01/2007 DIR