

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009305

FILED
Feb 11, 2009
Secretary of State

Entity Name: STEP BY STEP FOUNDATION, INC.

Current Principal Place of Business:

240 OLD FEDERAL HIGHWAY
SUITE # 120
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

240 OLD FEDERAL HIGHWAY
SUITE # 120
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 20-1711047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIOLA, SANDRA
267 MINORCA AVE
SUITE 101
CORAL GABLES, FL 33134 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: DP () Delete
Name: STRANSKY, LILIANE
Address: 6380 ALLISON ROAD
City-St-Zip: MIAMI BEACH, FL 33141

Title: DST () Delete
Name: SANCHEZ, ELIZABETH
Address: 12462 SW 45 DRIVE
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: DIAZ, MICHAEL
Address: 100 SE 2ND STREET - SUITE 2600
City-St-Zip: MIAMI, FL 33131

Title: TREA () Change (X) Addition
Name: ALTER, HERMAN
Address: 21335 NE 19TH COURT
City-St-Zip: NORTH MIAMI, FL 33179

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.

SIGNATURE: LILIANE STRANSKY

DP

02/11/2009

Electronic Signature of Signing Officer or Director

Date