2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010554

Apr 14, 2009 Secretary of State

Entity Name: VOICE OF LOVE TRAINING AND DEVELOPMENT, INC.

New Principal Place of Business: Current Principal Place of Business: 1100 EAST 52ND STREET HIALEAH, FL 33013 **Current Mailing Address: New Mailing Address:** 13651 SW 20TH STREET MIRAMAR, FL 33027 US FEI Number: 57-1213493 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: LOPEZ, ANA M 13651 SW 20 STREET MIRAMAR, FL 33027 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: () Change () Addition () Delete LOPEZ, ANA M Name: Name: Address: 13651 SW 20 STREET Address: City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: COELLO, LILIA Name: Address: 951 SW 121 AVE Address: City-St-Zip: DAVIE, FL 33325 US City-St-Zip: Title: () Delete Title: (X) Change () Addition NICHAR, JENELYS Name: CUEVAS, JENELYS Name: 5341 HAWKES BLUFF AVE 5341 HAWKES BLUFF AVE Address: Address: City-St-Zip: DAVIE, FL 33331 US City-St-Zip: DAVIE, FL 33331 US Title: () Delete Title: (X) Change () Addition Name: NICHAR, JENELYS Name: CUEVAS, JENELYS 5341 HAWKES BLUFF AVE 5341 HAWKES BLUFF AVE Address: Address: City-St-Zip: DAVIE, FL 33331 US City-St-Zip: DAVIE, FL 33331 US

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: ANA LOPEZ Ρ 04/14/2009