

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001773

FILED
May 01, 2007
Secretary of State

Entity Name: MIRIAM'S HOME OF NEW BEGINNINGS, INC.

Current Principal Place of Business:

271 SW 95TH TERRACE
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

271 SW 95TH TERRACE
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 57-1217698 **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:

WILLIAMS, LEVI G JR.
200 SOUTHEAST 13TH STREET
FORT LAUDERDALE, FL 33316 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: PF () Delete
Name: BEVANS, LUCILLE
Address: 271 SW 95TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Delete
Name: EDWARDS, JULIE
Address: 12809 SW 21ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: LOUIS, RICHARD
Address: 270 SW 95TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: RUSSELL-LOVE, DONETTE
Address: 7420 NW 5TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: T () Delete
Name: BORELAND, ANGELA
Address: 727 SW 122ND AVENUE
City-St-Zip: PEMBROKE PINES, FL 330255919

Title: S () Delete
Name: MCCLELLAN, APRIL
Address: 12864 BISCAYNE BLVD., #124
City-St-Zip: NORTH MIAMI, FL 33181

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

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 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: LUCILLE BEVANS

PF

05/01/2007

Electronic Signature of Signing Officer or Director

Date