2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 14, 2007 8:00 am Secretary of State

Principal Place of Indianases Sp97 BAY POINT RD BOXEFLIA, FL 33922 2. Principal Place of Business - No. P.C. Box # 3. Mailing Address Suite, Apt. #. citic	1. Entity Nam	MENT # N0500000		NG INSTITUT	ГΕ,			05-14-200°	-		
Suite. Apt. #, etc. Suite. Apt. #, etc. Suite Suite Suite Suite Suite State S	5697 BAY POINT RD		5697 BAY POINT RD							(111, D) (O)	
City & State City & State of Florida. I am familiar with, and accept in the city flags of the cit	2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Country			Suite	e, Apt. #, etc.			04272007	Chg-NP	CR2E03	37 (12/06)	
S. Certificate of status begints of Current Registered Agent 7. Name and Address of New Registered Agent Name Special R. UTRERA, P. A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 Street Address (P.O. Box Number is Not Acceptable) City FL City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code TL Zip Code STORE Address (P.O. Box Number is Not Acceptable) The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the origination of registered agent and bits 4 spikable. SIGNATURE Filing Foe is \$61.25 Due by May 1, 2007 9. Election Campaign Financing Filing Foe is \$61.25 Due by May 1, 2007 9. Election Campaign Financing AS5.00 May Be AR64tion MA Make check payable to Florida Department of State Florida Department of Sta				& State						No	t Applicable
SPIECEEL & UTRERA, PA. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or born, in the State of Florida. I am familiar with, and accept two obligations of registered agent. SIGNATURE Signature, function prince varie or registered agent and side repolatate. (NOTE Registered Agent soprature recities when inmitisting)	Zip				Cou	ntry			<u> </u>	Fee Require	
SPIECEGEL & UTRERA, P.A. 14TH FLOOR MIAMI, FL 33145 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. I am familiar with, and accept the obligations of registered agent or printed come of experience agent and bit is apartable. SIGNATURE Filling Poe is \$61.25 Due by May 1, 2007		6. Name and Address of Curren	t Registered	Agent		Nama	7. Name and	Address of New F	Registered /	Agent	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Signatu	1840 SW 2 4TH FLOO	22ND ST. OR					ess (P.O. Box Numbe	r is Not Acceptabl	e)		
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am Familiar with, and accept the obligations of registered agent. Signature Signature Signature, history or printer name of registered agent and bits if applicable. NOTE Registered Agent scribble in the purpose of changing its registered agent, or both, in the State of Florida. I am Familiar with, and accept the obligations of registered agent. Signature Name Signat	MIAMI, FL	33145			,	City				Zip Code	e
SIGNATURE Signaturus typec or printed name of registered agent and little 4 spokesable to practice agent soulce 4 spokesable to printed name of registered agent and little 4 spokesable to printed name of registered agent agen		·								<u>· `</u>	
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indicated on this report or supplemental report is true and accurate another by signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to except this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all office like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR