2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006
Secretary of State

DOCUMENT# N05000004282

Entity Name: JUST INSPIRE ME, INC.

Current Principal Place of Business:

9790 NAPOLI WOODS LANE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

9790 NAPOLI WOODS LANE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 65-1249408 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BORMAN, AMY S
9790 NAPOLI WOODS LANE
DELRAY BEACH, FL 33446 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: P ( ) Delete
Name: BORMAN, AMY S
Address: 9790 NAPOLI WOODS LANE
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: VP ( ) Delete
Name: ALPER, SANFORD
Address: 3930 WEST FITCH AVE.
City-St-Zip: LINCOLNWOOD, IL 60712 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SHASHA, HOPE
Address: 10814 LAKE JASMINE DRIVE
City-St-Zip: BOCA RATON, FL 33498 US

Title: VP (X) Change ( ) Addition
Name: SHASHA, JACOB
Address: 10814 LAKE JASMINE DRIVE
City-St-Zip: BOCA RATON, FL 33498 US

Title: S ( ) Change (X) Addition
Name: ALPER, SANFORD
Address: 3930 WEST FITCH AVENUE
City-St-Zip: LINCOLNWOOD, IL 60712

Title: T ( ) Change (X) Addition
Name: BORMAN, AMY S
Address: 9790 NAPOLI WOODS LANE
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the 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: HOPE SHASHA P 03/22/2006

Electronic Signature of Signing Officer or Director — Date