

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005276

FILED
Mar 28, 2007
Secretary of State

Entity Name: BETTER LIFE FOR O.P.D.C., CORP.

Current Principal Place of Business:

400 W. DAYTON CIRCLE
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

400 W. DAYTON CIRCLE
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 11-3751563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUGAT, MUCANEAU
400 W. DAYTON CIRCLE
FORT LAUDERDALE, FL 33312 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: D () Delete
Name: DU GAT, LOUIDOMA
Address: 400 W. DAYTON CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: DUGAT, MUCANEAU
Address: 400 W. DAYTON CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: ETIENNE, EVANCE
Address: 2730 SOMERSET DRIVE V107
City-St-Zip: LAUDERDALE, FL 33311

Title: D () Delete
Name: DENIZAT, ERNELUS
Address: 2730 SOMERSET DRIVE V107
City-St-Zip: LAUDERDALE, FL 33311

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:

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: MUCANEAU DUGAT

D

03/28/2007

Electronic Signature of Signing Officer or Director

Date