

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005848

FILED  
Jan 22, 2007  
Secretary of State

**Entity Name:** DADS FOR ALL CHILDREN TOTAL SUCCESS INC.

**Current Principal Place of Business:**

2020 NE 163RD ST.  
SUITE 300  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

2020 NE 163RD ST.  
SUITE 300  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

P.O. BOX 601017  
NORTH MIAMI BEACH, FL 33160 US

**FEI Number:** 51-0543835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KEMP, JANETTE M  
1651 NE 110TH STREET  
MIAMI, FL 33161 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: ROCK, EMERSON  
Address: 1640 NW 143RD STREET  
City-St-Zip: MIAMI, FL 33167

Title: VC ( ) Delete  
Name: KEMP, JANETTE  
Address: 1651 NE 110TH STREET  
City-St-Zip: MIAMI, FL 33161

Title: VC ( ) Delete  
Name: WOODS, CHARLES  
Address: 1671 NW 195TH STREET  
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete  
Name: WOODS, NAOMI  
Address: 1671 NW 195TH STREET  
City-St-Zip: MIAMI, FL 33169

Title: T ( ) Delete  
Name: ROCK, ANOCIA  
Address: 1640 NW 143RD STREET  
City-St-Zip: MIAMI, FL 33167

**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:

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: EMERSON ROCK

D

01/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date