

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005848

FILED
Mar 17, 2009
Secretary of State

Entity Name: DADS FOR ALL CHILDREN TOTAL SUCCESS INC.

Current Principal Place of Business:

1640 N.W. 143 STREET
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

1640 N.W. 143 STREET
MIAMI, FL 33167

New Mailing Address:

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 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

03/17/2009

Electronic Signature of Signing Officer or Director

Date