


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90047 048 *****70.00

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| DOCUMENT # N05000008153 1. Entity Name JANELLE'S WISHING WELL FOUNDATION, INC. | |  | |
| Principal Place of Business 13903 NW 67TH AVE. MIAMI, FL 33014 | | Mailing Address 13903 NW 67TH AVE. MIAMI, FL 33014 | |
| 2. Principal Place of Business 4581 Weston RD Suite, Apt. #, etc. #324 City & State Weston, FL Zip 33331 | | 3. Mailing Address 4581 Weston RD Suite, Apt. #, etc. #324 City & State Weston, FL Zip 33331 | |
| Country USA | | Country USA | |
| 4. FEI Number 20-372523 | | Applied For <input checked="" type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent GRANADO, GISELA B ESQ 13903 NW 67TH AVE. MIAMI, FL 33014 | | 7. Name and Address of New Registered Agent Name Granado, Gisela B. ESQ. Street Address (P.O. Box Number is Not Acceptable) 4581 Weston RD #324 City Weston FL Zip Code 33331 | |
| 8. 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. | | | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERTOT, BARBARA 13903 NW 67TH AVE. MIAMI, FL 33014 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Bertot, Barbara 4581 Weston RD #324 Weston, FL 33331 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | O GRANADO, GISELA B 13903 NW 67TH AVE. MIAMI, FL 33014 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | O Granado, Gisela B 4581 Weston RD #324 Weston, FL 33331 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T MANNINO, JESSICA 13903 NW 67TH AVE. MIAMI, FL 33014 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T Manning, Jessica 4581 Weston RD #324 Weston, FL 33331 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S BERTOT, JANINE 13903 NW 67TH AVE. MIAMI, FL 33014 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S Bertot, Janine 4581 Weston RD #324 Weston, FL 33331 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | _____ _____ _____ _____ | TITLE NAME STREET ADDRESS CITY-ST-ZIP | _____ _____ _____ _____ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | _____ _____ _____ _____ | TITLE NAME STREET ADDRESS CITY-ST-ZIP | _____ _____ _____ _____ |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE: <u>Barbara Bertot</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | Date <u>2/24/06</u> Daytime Phone # _____ | |