

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009314

FILED
Mar 09, 2006
Secretary of State

Entity Name: MY YOUTH IN PROGRESS, INC.

Current Principal Place of Business:

925 NE 209 STREET
206
MIAMI, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 530186
MIAMI SHORES, FL 33153 US

New Mailing Address:

FEI Number: 11-3758945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULTI MEDIA PROJECTS, INC.
925 NE 209 STREET
206
MIAMI, FL 33179 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: CEO () Delete
Name: HERCULE, JOSUE
Address: 925 NE 209 STREET # 206
City-St-Zip: MAIMI, FL 33179 US

Title: CEO () Delete
Name: ERNNEUS, GARY
Address: 925 NE 209 STREET # 206
City-St-Zip: MAIMI, FL 33179 US

Title: P () Delete
Name: BAUCICAUT, GUERDA
Address: 925 NE 209 STREET # 206
City-St-Zip: MIAMI, FL 33179 US

Title: VP () Delete
Name: CHARLES, MARIE M
Address: 925 NE 209 STREET # 206
City-St-Zip: MIAMI, FL 33179 US

Title: FA () Delete
Name: SEYMOUR-JACKSON, PORTIA
Address: 925 NE 209 STREET # 206
City-St-Zip: MIAMI, FL 33179 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: F (X) Change () Addition
Name: HERCULE, JOSUE
Address: 925 NE 209 STREET # 206
City-St-Zip: MAIMI, FL 33179 US

Title: F (X) Change () Addition
Name: ERNNEUS, GARY
Address: 925 NE 209 STREET # 206
City-St-Zip: MAIMI, FL 33179 US

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: VP () Change (X) Addition
Name: LOUIS, KERNST
Address: 925 NE 209 STREET # 206
City-St-Zip: MIAMI, FL 33179 US

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: HERCULEJOSUE

F

03/09/2006

Electronic Signature of Signing Officer or Director

Date