

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012798

FILED
May 06, 2007
Secretary of State

Entity Name: ACPACH INC.

Current Principal Place of Business:

230 NE 121ST TERRACE
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

230 NE 121ST TERRACE
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HONORE, WITHNIE
160 NE 128TH STREET
NORTH MIAMI, FL 33161 US

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: HONORE, WITHNIE
Address: 160 NE 128 TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: AUGUSTIN, ONICKEL
Address: 230 NE 121ST TERRACE
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: FILS-AIME, ARRIE
Address: 905 NW 124TH STREETE
City-St-Zip: NORTH MIAMI, FL 33168

Title: S () Delete
Name: TOUSSAINT, JUDITH
Address: 750 NW 140TH STREET
City-St-Zip: MIAMI, FL 33168

Title: T () Delete
Name: MEDARD, LEDNA H
Address: 130 NE 132ND TERRACE
City-St-Zip: NORTH MIAMI, FL 33161

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: S (X) Change () Addition
Name: DORCELUS, JUDY
Address: 11925 NE 2 AVE #B216
City-St-Zip: NORTH MIAMI, FL 33161

Title: T (X) Change () Addition
Name: MEDARD, LEDNA H
Address: 160 NE 128 STREET
City-St-Zip: NORTH MIAMI, FL 33161

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: WITHNIE HONORE

D

05/06/2007

Electronic Signature of Signing Officer or Director

Date