

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000222

FILED
Feb 09, 2007
Secretary of State

Entity Name: GIFTS FROM ABOVE, INC.

Current Principal Place of Business:

P O BOX 162022
MIAMI, FL 33166

New Principal Place of Business:

10711 SW 124 ROAD
MIAMI, FL 33186

Current Mailing Address:

P O BOX 162022
MIAMI, FL 33166

New Mailing Address:

P O BOX 165837
MIAMI, FL 33116

FEI Number: 20-4145114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, REINALDO
10711 SW 124TH RD
MIAMI, FL 33186 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: RODRIGUEZ, REINALDO
Address: 10711 SW 124TH RD
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: HASPIL, ZUANY
Address: 11991 SW 119TH ST
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: LEE, BARBARA
Address: 10420 SW 143RD AVE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: FERNANDEZ, ANGELINA
Address: 1005 NE 91ST TERRACE
City-St-Zip: MIAMI SHORES, FL 33138

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: D (X) Change () Addition
Name: FERNANDEZ, ANGELINE
Address: 1005 NE 91ST TERRACE
City-St-Zip: MIAMI SHORES, FL 33138

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: REINALDO RODRIGUEZ

D

02/09/2007

Electronic Signature of Signing Officer or Director

Date