

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005807

FILED
Apr 23, 2007
Secretary of State

Entity Name: AMERICAN RENAISSANCE VENTURE INC.

Current Principal Place of Business:

11965 S.W. 269 TERRACE
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

11965 S.W. 269 TERRACE
HOMESTEAD, FL 33032

New Mailing Address:

FEI Number: 20-4986073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD STE 400
MIAMI BEACH, FL 33139 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: CLOUGH, SUZAN C
Address: 11965 S.W. 269 TERRACE
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Delete
Name: CUELLAR, RENEE
Address: 15060 SW 152 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: NELSON, DELANO A
Address: 11965 S.W. 269 TERRACE
City-St-Zip: HOMESTEAD, FL 33032

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CLOUGH, SUZAN C
Address: 11965 S.W. 269 TERRACE
City-St-Zip: HOMESTEAD, FL 33032

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P () Change (X) Addition
Name: CUELLAR, LORI
Address: 15060 S.W. 152 TERRACE
City-St-Zip: MIAMI, FL 33187

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: SUZAN C. CLOUGH

VP

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date