

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006778

FILED
May 03, 2007
Secretary of State

Entity Name: "SISTAH TO SISTAH" CONNECTION, INCORPORATED

Current Principal Place of Business:

11030 N.W. 16TH STREET
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

11030 N.W. 16TH STREET
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 30-0413211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ROLLE-HOLLOWAY, GIGI
11030 N.W. 16TH STREET
PEMBROKE PINES, FL 33026 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: ROLLE-HOLLOWAY, GIGI
Address: 11030 N.W. 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33026

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O () Change (X) Addition
Name: ROSE-MATTHIAS, DEBORAH MRS.
Address: 12140 N.E. 11TH PLACE
City-St-Zip: MIAMI, FL 33161 US

Title: O () Change (X) Addition
Name: SHEFFIELD, RONDA MRS.
Address: 7570 INDIGO STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: O () Change (X) Addition
Name: KING, REWA MRS
Address: PO BOX 469
City-St-Zip: YOUNGSVILLE, LN 70592 US

Title: O () Change (X) Addition
Name: CLARKE, CYNTHIA MRS
Address: 20833 N.W. 24TH COURT
City-St-Zip: MIAMI GARDENS, FL 33056 US

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: GIGI ROLLE-HOLLOWAY

D

05/03/2007

Electronic Signature of Signing Officer or Director

Date