

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 05, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90251 030 \*\*\*\*61.25

**DOCUMENT # N06000006978**

1. Entity Name  
YOUTH ENCOURAGEMENT SERVICES, INC.



Principal Place of Business

3027 NW 7TH AVE  
MIAMI, FL 33127

Mailing Address

1936 NW 71ST STREET  
MIAMI, FL 33147

**DO NOT WRITE IN THIS SPACE**



04302008 No Chg-NP

CR2E037 (4/06)

4. FEI Number  
51-0588105

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

APEDO, GWENDOLYN  
1936 NW 71 STREET  
MIAMI, FL 33147

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	APEDO, GWENDOLYN
STREET ADDRESS	1936 NW 71 STREET
CITY-ST-ZIP	MIAMI, FL 33147
TITLE	DV
NAME	APEDO, SHEKINAH
STREET ADDRESS	2920 N. 18TH STREET
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	D
NAME	RUFFIN, WILLIE J JR.
STREET ADDRESS	673 NE 86TH STREET #3
CITY-ST-ZIP	MIAMI, FL 33168
TITLE	D
NAME	APEDO, EMMANUEL Y
STREET ADDRESS	886 NW 74TH ST.
CITY-ST-ZIP	MIAMI, FL 33150
TITLE	S
NAME	APEDO, SYMIRIA G
STREET ADDRESS	1936 NW 71 STREET
CITY-ST-ZIP	MIAMI, FL 33147
TITLE	D
NAME	APEDO, MICHAEL D
STREET ADDRESS	1936 NW 71 STREET
CITY-ST-ZIP	MIAMI, FL 33147

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

*[Signature]* *Gwendolyn Apedo* 4/29/08 (305) 924-3597