## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000008803

Sep 05, 2007 Secretary of State

FILED

Entity Name: MY BROTHER AND SISTER'S KEEPER INC.

Current Principal Place of Business: New Principal Place of Business:

3607 N 19TH STREET APT C UNIT 19 TAMPA, FL 33605

Current Mailing Address: New Mailing Address:

3607 N 19TH STREET APT C UNIT 19 TAMPA, FL 33605

FEI Number: 20-5167890 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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:

MOO YOUNG, MARCO 3605 N 19TH STREET APT C UNIT 19 TAMPA, FL 33605 US

**OFFICERS AND DIRECTORS:** 

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

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## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: MOO YOUNG, MARCO
Address: 3605 N 19TH STREET APT C UNIT 19
Name: MOO YOUNG, MARCO
Address: 3605 N 19TH STREET APT C UNIT 19

City-St-Zip: TAMPA, FL 33605 City-St-Zip: TAMPA, FL 33605

Title: D ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 TAYLOR, VERONICA
 Name:
 TAYLOR, RAYMOND

 Address:
 5009 E SLIGH AVE APT D
 Address:
 9408 GRAYSTONE

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 THONOTOSASSA, FL 33592

Title: S () Delete Title: T (X) Change () Addition Name: OWENS, TYECHIA Name: OWENS, TYECHIA

Address: 29120 CORD STREET APT A Address: 29120 CORD STREET APT A

City-St-Zip: TAMPA, FL 33605 City-St-Zip: TAMPA, FL 33605

Title: T ( ) Delete Title: VP (X) Change ( ) Addition

Name: JOHNSON, ANTHONY Name: PRAWL, RENEE
Address: 3511 RIVER GROVE DR Address: 3607 N19TH STREET UNIT C

City-St-Zip: TAMPA, FL 33610 City-St-Zip: TAMPA, FL 33610

Title: ( ) Delete Title: S ( ) Change (X) Addition

 Name:
 Name:
 STREATER, KANESHAI

 Address:
 Address:
 9408 GRAYSTONE

 City-St-Zip:
 City-St-Zip:
 THONOTOSASSA, FL 33592

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: MARCO MOOYOUNG E 09/05/2007