

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

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000009574

1. Entity Name
ACTION TODAY FOR BRIGHTER TOMORROWS, INC.



Principal Place of Business
6310 PIERCE ST
APT B
HOLLYWOOD, FL 33024

Mailing Address
6310 PIERCE ST
APT B
HOLLYWOOD, FL 33024



04242008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5527663	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WATTS, JAMES
8964 STATE RD 84
DAVIE, FL 33324

**DO NOT WRITE
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

U000000937925

05/27/08-80071-006 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD GALLERANI, TABITHA 6310 PIERCE ST APT B HOLLYWOOD, FL 33024
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD FLOREZ, LEON 7301 GARFIELD ST HOLLYWOOD, FL 33024
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LEONE, AMANAD 8951 N. NEW RIVER CANAL 48 PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FRAGE, FREDDIES 1260 NW 78TH TERRACE PLANTATION, FL 33323
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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 #

4/25/08 754-234-7186