

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010593

FILED
Apr 28, 2007
Secretary of State

Entity Name: INTERNATIONAL YOUTH ORIENTATION FOR LIFE, INC.

Current Principal Place of Business:

3840 N.E. 15TH AVE.
POMPANO BCH, FL 330646156

New Principal Place of Business:

3840 N.E. 15TH AVE.
POMPANO BCH, FL 330646156 US

Current Mailing Address:

3840 N.E. 15TH AVE.
POMPANO BCH, FL 330646156

New Mailing Address:

P.O. BOX 51618
LIGHTHOUSE POINT, FL 330746156 US

FEI Number: 51-0600439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESSOURCES, PATRICK
3840 N.E. 15TH AVE.
POMPANO BCH, FL 330646156 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: DESSOURCES, PATRICK
Address: 3840 N.E. 15TH AVE.
City-St-Zip: POMPANO BCH, FL 330646156

Title: D () Delete
Name: ROSEMOND, PAUL A
Address: 3840 N.E. 15TH AVE.
City-St-Zip: POMPANO BCH, FL 330646156

Title: D () Delete
Name: JACQUES, DJYNO
Address: 3840 N.E. 15TH AVE.
City-St-Zip: POMPANO BCH, FL 330646156

Title: D () Delete
Name: MAISONNEVE, PATRICK
Address: 3840 N.E. 15TH AVE.
City-St-Zip: POMPANO BCH, FL 330646156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: JACQUES, DJYNO
Address: 148 NORTH EAST APT. 40
City-St-Zip: OAKLAND PARK, FL 33334

Title: D (X) Change () Addition
Name: DISTEFANO, ROBERT P
Address: 7010 LONGLEAF DRIVE
City-St-Zip: PARKLAND, FL 330763947

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: PATRICK DESSOURCES

D

04/28/2007

Electronic Signature of Signing Officer or Director

Date