

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06588

FILED
Apr 30, 2007
Secretary of State

Entity Name: 4 CHILDREN'S S.A.K.E., INC.

Current Principal Place of Business:

2400 E. LAS OLAS BLVD
PMB 126
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

2400 E. LAS OLAS BLVD
PMB 126
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 65-0016252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOEMAKER, WILLIAM E.
2400 E. LAS OLAS BLVD
PMB 126
FT. LAUDERDALE, FL 33301 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: GARRET, JOAN
Address: 4629 POINCIANA STREET #302
City-St-Zip: LBTs, FL 33308

Title: TD () Delete
Name: JANET RIHL,
Address: 3389 COCOPLUM CIR
City-St-Zip: COCONUT CREEK, FL 33063

Title: PD () Delete
Name: SHOEMAKER, WILLIAM
Address: 2301 SOLAR PLAZA DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: HALEY, BARBARA L
Address: 8002 SW 5TH STREET
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: SHOEMAKER, WILLIAM
Address: 4850 NE 13TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

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

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: WILLIAM E. SHOEMAKER

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date