

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004879

FILED  
Jul 01, 2008  
Secretary of State

**Entity Name:** NEW HORIZONS OUTREACH SERVICES, INC.

**Current Principal Place of Business:**

12460 SW 8TH STREET  
SUITE 103  
MIAMI, FL 33184

**New Principal Place of Business:**

**Current Mailing Address:**

12460 SW 8TH STREET  
SUITE 103  
MIAMI, FL 33184

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

LOO FIGUERO, SARAH  
12460 SW 8TH STREET  
SUITE 103  
MIAMI, FL 33184 US

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: LOO FIGUERO, SARAH  
Address: 12460 SW 8TH STREET SUITE 103  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: PEREZ, ISABEL  
Address: 12460 SW 8TH STREET SUITE 103  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: LOO, CHARLIE  
Address: 12460 SW 8TH STREET SUITE 103  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: LOO, YUEN  
Address: 12460 SW 8TH STREET SUITE 103  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: PEREZ, ALEJANDRO  
Address: 12460 SW 8TH STREET SUITE 103  
City-St-Zip: MIAMI, FL 33184

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: ISABEL PEREZ

D

07/01/2008

Electronic Signature of Signing Officer or Director

Date