2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007213

Entity Name: RAPHA FAMILY SERVICES, INC.

FILED May 16, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
2010 NW 193 TERRACE MIAMI, FL 33056		1501 NW 47TH AVE SUITE B LAUDERHILL, FL 33313	
Current Mailing Address:		New Mailing Address:	
2010 NW 1 MIAMI, FL	93 TERRACE 33056		
	26-0608235 FEI Number Applied For () FEI Nur e with s. 607.193(2)(b), F.S., the corporation did not receive t Address of Current Registered Agent:	·=	
BROWN, A 2010 NW 1 MIAMI, FL	93 TERRACE		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATURE:			
Electronic Signature of Registered Agent			Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete BROWN, ANNEZE B 2010 NW 193 TERRACE MIAMI, FL 33056	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST () Delete HODGE-JABOIN, ALTHEA 19255 NE 10TH AVE #121 MIAMI, FL 33083	Title: Name: Address: City-St-Zip:	S (X) Change () Addition HODGE-JABOIN, ALTHEA 19255 NE 10TH AVE #121 MIAMI, FL 33083
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	C () Change (X) Addition LAMARQUE, WANDHA 7206 NW 76 STREET TAMARAC, FL 33321
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition SPENCER, RICARRDO 4055 NW 183RD TER MIAMI, FL 33056
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition BROWN, KEVIN 2010 NW 193RD TER MIAMI, FL 33056
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition JAMES, SHANEL 879 NE 214TH LANE #1 MIAMI, FL 33179

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: ANNEZE BROWN CEO 05/16/2008