

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007461

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: AIM TO ACHIEVE!, INC.

## Current Principal Place of Business:

2775 NE 187 ST  
#517W  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

2775 NE 187 ST  
#517W  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: 26-0568775      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEWIS, KAREN J  
2775 NE 187 ST  
#517W  
AVENTURA, FL 33180 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: NORRIS, RICKY  
Address: 3009 NW 51 TERRACE  
City-St-Zip: MIAMI, FL 33142

Title: D ( ) Delete  
Name: GARY, BRITT  
Address: 4225 NW 23 AVE  
City-St-Zip: MIAMI, FL 33142

Title: D (X) Delete  
Name: ASKEW, RANDY  
Address: 5509 NW 7TH AVE  
City-St-Zip: MIAMI, FL 33127

Title: PD ( ) Delete  
Name: LEWIS, KAREN  
Address: 2775 NE 187 ST #517W  
City-St-Zip: AVENTURA, FL 33180

Title: VD ( ) Delete  
Name: JONES, LISA  
Address: 20801 BISC BLVD, #101  
City-St-Zip: AVENTURA, FL 33180

Title: SD ( ) Delete  
Name: JONES-DAVIS, MELANIE  
Address: 14075 NW 5 PLACE  
City-St-Zip: MIAMI, FL 33168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: MELANIE, JONES-DAVIS  
Address: 14075 NW 5 PLACE  
City-St-Zip: MIAMI, FL 33168

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

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

Title: VD (X) Change ( ) Addition  
Name: LEWIS, IKE  
Address: 2775 NE 187 ST, 517W  
City-St-Zip: AVENTURA, FL 33180

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: KAREN J. LEWIS

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date