

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007917

FILED
May 22, 2009
Secretary of State

Entity Name: KAY PA-W SERVICE CENTER, INC.

Current Principal Place of Business:

75 NW 167TH STREET
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

PO BOX 4142
HALLANDALE, FL 33008

New Mailing Address:

FEI Number: 26-0149750 FEI Number Applied For () FEI Number Not Applicable () 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:

FRANCOIS, NADINE
75 NW 167TH ST
NORTH MIAMI BEACH, FL 33169 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: P () Delete
Name: FRANCOIS, NADINE
Address: PO BOX 4142
City-St-Zip: HALLANDALE, FL 33008

Title: VP () Delete
Name: PRUDENT, LESLY
Address: 1500 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33132

Title: ACC () Delete
Name: TOUNKARA, BAKARI
Address: P O BOX 4142
City-St-Zip: HALLANDALE, FL 33179

Title: SEC () Delete
Name: GARNET, MARIE L
Address: 8948 VALENCIA GARDENS DR
City-St-Zip: ORLANDO, FL 32825

Title: AD () Delete
Name: SAINT SURIN, ALEX
Address: 75 NW 167 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33169

Title: VP () Delete
Name: AUBRY, ANDRE
Address: 590 NW 157TH AVE
City-St-Zip: PEMBROKE PINES, FL 33028

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:

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: NADINE FRANCOIS

CEO

05/22/2009

Electronic Signature of Signing Officer or Director

Date