

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008075

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TOTAL COUNSELING SERVICES, INC.

## Current Principal Place of Business:

2501 BRICKELL AVE  
SUITE 507  
MIAMI, FL 33129

## New Principal Place of Business:

758 NE 90TH STREET  
#505  
MIAMI, FL 33138

## Current Mailing Address:

2501 BRICKELL AVE  
SUITE 507  
MIAMI, FL 33129

## New Mailing Address:

758 NE 90TH STREET  
#505  
MIAMI, FL 33138

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A GIFT FOR THE SOUL, INC.  
2501 BRICKELL AVE  
SUITE 507  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

A GIFT FOR THE SOUL, INC.  
758 NE 90TH STREET  
#505  
MIAMI, FL 33138 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: CYNTHIA SERURE

04/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SERURE, CYNTHIA  
Address: 2501 BRICKELL AVE SUITE 507  
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete  
Name: BLANC, JONHNLEE  
Address: 2501 BRICKELL AVE SUITE #507  
City-St-Zip: MIAMI, FL 33129

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SERURE, CYNTHIA  
Address: 758 NE 90TH STREET #505  
City-St-Zip: MIAMI, FL 33138

Title: D (X) Change ( ) Addition  
Name: BLANC, JONHNLEE  
Address: 758 NE 90TH STREET #505  
City-St-Zip: MIAMI, FL 33138

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: CYNTHIA SERURE

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date