2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# N07000009612

Entity Name: L.B.S. SPECIAL ANGELS, INCORPORATED.

Current Principal Place of Business:

2841 NW 171ST TERRACE
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

2841 NW 171ST TERRACE
MIAMI, FL 33056

New Mailing Address:

FEI Number: 26-1321115 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLETCHER, IRIS
2841 NW 171ST TERRACE
MIAMI, FL 33056 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: P ( ) Delete
Name: FLETCHER, IRIS
Address: 2841 NW 171ST TERRACE
City-St-Zip: MIAMI, FL 33056

Title: V ( ) Delete
Name: BAIN, DORIS
Address: 16440 NW 17TH PLACE
City-St-Zip: MIAMI GARDENS, FL 33054

Title: T ( ) Delete
Name: JONES, PAULETTE
Address: 3101 NW 157TH TERRACE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: S ( ) Delete
Name: WORTHEY, KAREN
Address: 3931 NW 194TH STREET
City-St-Zip: MIAMI GARDENS, FL 33055

Title: D ( ) Delete
Name: GORDAN, KAREAM
Address: 395 NW 177TH STREET
City-St-Zip: MIAMI, FL 33169

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: IRIS FLETCHER PRES 03/02/2009

Electronic Signature of Signing Officer or Director — Date