

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003922

FILED
Apr 21, 2009
Secretary of State

Entity Name: MIAMI-READS FAMILY LITERACY PROGRAM INC.

Current Principal Place of Business:

19380 COLLINS AVENUE PH 21
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

1624, PLUNKETT STREET
1
HOLLYWOOD, FL 33020 US

Current Mailing Address:

19380 COLLINS AVENUE PH 21
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

1624, PLUNKETT STREET
1
HOLLYWOOD, FL 33020 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HODGES, SANDRA
19380 COLLINS AVENUE PH 21
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

HODGES, SANDRA
1624, PLUNKETT STREET
1
HOLLYWOOD, FL 33020 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:

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAKER, GIL Z
Address: 1001-91 STREET #708
City-St-Zip: BAY HARBOR, FL 33154

Title: VPD () Delete
Name: SMITH, MICHAEL
Address: 1370 WASHINGTON AVE #306
City-St-Zip: MIAMI BCH, FL 33139

Title: STD () Delete
Name: NEWBERRY, RAVIE
Address: 4301 SW 33RD DR
City-St-Zip: WEST PARK, FL 33021

Title: D () Delete
Name: LUCE, ROBERT
Address: 640 S PARK ROAD #426
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: STANGO, FRANK
Address: 4301 SW 33RD DRIVE
City-St-Zip: WEST PARK, FL 33021

Title: D () Delete
Name: OROPEZA, MARIA
Address: 1300 LENNOX AVE
City-St-Zip: MIAMI BCH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, MICHAEL
Address: 1624, PLUNKETT STREET NO. 1
City-St-Zip: H, FL 33020 US

Title: VPD (X) Change () Addition
Name: NEWBERRY, RAVIE
Address: 4301 SW 33RD DRIVE
City-St-Zip: WEST PARK, FL 33021 US

Title: STD (X) Change () Addition
Name: OROPEZA, M
Address: 1300, LENNOX AVENUE
City-St-Zip: MIAMI BEACH, FL 33139 US

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

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

Title: D (X) Change () Addition
Name: OROPEZA, SONIA
Address: 1300 LENNOX AVE
City-St-Zip: MIAMI BEACH, FL 33139 US

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: SANDRA HODGES

O/D

04/21/2009

Electronic Signature of Signing Officer or Director

Date