

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004387

FILED
May 04, 2011
Secretary of State

Entity Name: URBAN RESURRECTION CORPORATION

Current Principal Place of Business:

114 OAK AVE
CORAL GABLES, FL 33133

New Principal Place of Business:

Current Mailing Address:

114 OAK AVE
CORAL GABLES, FL 33133

New Mailing Address:

FEI Number: 38-3783570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHILIP, MICHAEL
114 OAK AVE
CORAL GABLES, FL 33133 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: DP
Name: JUSTINIANO, RAUL
Address: 5020 SW 94 AVE
City-St-Zip: MIAMI, FL 33165 US

Title: DV
Name: HAMMOND, GINNY
Address: 440 NW 19TH STREET
City-St-Zip: HOMESTEAD, FL 33030 US

Title: DT
Name: JUSTINIANO, RAUL
Address: 5020 SW 94 AVE
City-St-Zip: MIAMI, FL 33165 US

Title: DS
Name: MARTINEZ, ESPERANZA
Address: 9715 HAMMOCKS BLVD, #108
City-St-Zip: MIAMI, FL 33196 US

Title: D
Name: HAYES, JOHN
Address: FLAT 12 69 JOHNSON STREET
City-St-Zip: LONDON, UK E10AQ UK

Title: D
Name: KELLY, CLAY
Address: 3106 DORILTON CT
City-St-Zip: LOUISVILLE, KY 40241 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL PHILIP

D

05/04/2011

Electronic Signature of Signing Officer or Director

Date