2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2010
Secretary of State

DOCUMENT# N09000008897

Entity Name: A CHANCE FOR KIDS, INC.

Current Principal Place of Business:

4840 N. ANDREWS AVENUE
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

4840 N. ANDREWS AVENUE
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 27-0877798 **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:

OCTAVIEN, NIXON
4840 N. ANDREWS AVENUE
FORT LAUDERDALE, FL 33309 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: PD
Name: OCTAVIEN, NIXON PRESIDE
Address: 4840 N. ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: SD
Name: OCTAVIEN, ALTA SECRETA
Address: 4840 N. ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: TD
Name: PROSPER, FRANTZ TREASUR
Address: 1940 S. FULLERTON ROAD #69
City-St-Zip: ROWLAND HEIGHTS, CA 91748

Title: D
Name: PHILLIPE, MARTINE MEMBER
Address: 3590 NW 80 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D
Name: ESPERANCE, ERICK MEMBER
Address: 629 NE 2ND AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

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: NIXONOCTAVIEN PRES 05/10/2010

Electronic Signature of Signing Officer or Director — Date