2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011901

FILED Apr 27, 2012 Secretary of State

Entity Name: GIFTED HANDS TRAINING AND SUPPORT, INC.

Current Principal Place of Business: New Principal Place of Business:

3600 SOUTH STATE RD 7 334

MIRAMAR, FL 33023

Current Mailing Address: New Mailing Address:

3600 SOUTH STATE RD 7, SUITE 221 MIRAMAR, FL 33023

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EJEHIOKHIN SARAH ABHULIMEN 3600 SOUTH STATE RD 7, SUITE 221 MIRAMAR, FL 33023 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: EJEHIOKHIN SARAH ABHULIMEN Address: 3600 SOUTH STATE RD 7, SUITE 221

City-St-Zip: MIRAMAR, FL 33023

Title: VPD Name: ODAI, MARY

Address: 3021 NW 35TH AVE APT #C 201
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: SD

 Name:
 ADIGUN, AYODELE

 Address:
 4711 SW 152ND TERR

 City-St-Zip:
 MIRAMAR, FL 33027

Title: TD

Name: MEVS, LAURENT E

Address: 5300 WASHINGTON ST APT #A140

City-St-Zip: HOLLYWOOD, FL 33021

Title: [

Name: DORVAL, LOUIS M Address: 120 NW 124TH ST City-St-Zip: MIAMI, FL 33168

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: SARAAH ABHULIMEN P 04/27/2012