

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001594

FILED
Jun 22, 2012
Secretary of State

Entity Name: EMBRACING TEAM INC.

Current Principal Place of Business:

325 NW 18TH COURT
POMPANO BEACH, FL 33060

New Principal Place of Business:

501 NW 17TH AVENUE
POMPANO BEACH, FL 33069

Current Mailing Address:

325 NW 18TH COURT
POMPANO BEACH, FL 33060

New Mailing Address:

2351 WEST ATLANTIC BOULEVARD
P.O. BOX 668402
POMPANO BEACH, FL 33066

FEI Number: 37-1622728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMONORD, LATOYA
325 NW 18TH COURT
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

ALMONORD, LATOYA
501 NW 17TH AVENUE
POMPANO BEACH, FL 33069 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: LATOYA ALMONORD

06/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ALMONORD, LATOYA
Address: P.O. BOX 668402
City-St-Zip: POMPANO BEACH, FL 33066

Title: VPD
Name: ALMONORD, MICHELIN
Address: P.O. BOX 668402
City-St-Zip: POMPANO BEACH, FL 33066

Title: SD
Name: ETIENNE, JOCELINE
Address: P.O. BOX 668402
City-St-Zip: POMPANO BEACH, FL 33066

Title: TD
Name: GREGORIE, CHRISTINA
Address: P.O. BOX 668402
City-St-Zip: POMPANO BEACH, FL 33066

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: LATOYA ALMONORD

MS.

06/22/2012

Electronic Signature of Signing Officer or Director

Date