2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22166

Address:

City-St-Zip:

35 N.W. 195 STREET

MIAMI, FL 33169

Apr 21, 2005 Secretary of State

Entity Name: SOSYETE KOUKOUY, MIYAMI, INC. **Current Principal Place of Business: New Principal Place of Business:** 5921 N.E. 2ND AVENUE MIAMI, FL 33137 US **Current Mailing Address: New Mailing Address:** 5919 N.E. 2ND AVENUE MIAMI, FL 33137 FEI Number: 65-0011457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DENIS, JEAN-MARIE DENIS, JEAN-MARIE 310 N.É. 97TH STREET 310 N.E. 97TH STREET MIAMI, FL 33138 MIAMI, FL 33138 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: 04/21/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DENIS, JEAN-MARIE Name: Name: Address: 310 N.E. 97TH STREET Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip: Title: Title: () Delete () Change () Addition GREGOIRE, JEANETTE Name: Name: Address: 1280 N.E. 138 STREET Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition YOLANDE, THOMAS BLEUS, ROSE Name: Name: 5919 N.E. 2ND AVENUE 5919 N.E. 2ND AVENUE Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33137 Title: VPD () Delete Title: VPD (X) Change () Addition WAINWRIGHT, FRANTZ REGISTRE, ERNST Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

1280 N.E 138TH. STREET

MIAMI, FL 33161

SIGNATURE: JEAN-MARIE DENIS PD 04/21/2005