


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90217 003 ****61.25

DOCUMENT # N31742					
1. Entity Name IMPROVEMENT OF MINORITIES IN INTERNAL REVENUE SERVICE "(AIM-IRS)", INC.					
Principal Place of Business C/O CROOK, TERRI POST OFFICE BOX 15736 PLANTATION, FL 33318 US			Mailing Address C/O CROOK, TERRY POST OFFICE BOX 15736 PLANTATION, FL 33318 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04262005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 65-0070697	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
EVANS, CYNTHIA 7850 SW 6TH COURT PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Cynthia Evans</u>		(NOTE: Registered Agent signature required when reinstating)		DATE <u>4-25-05</u>	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	Phyllis E. Tyler	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PARROTT, TERRI		NAME	7850 SW 6th Court	
STREET ADDRESS	5774 NW 120TH AVE.		STREET ADDRESS	Plantation, FL 33324	
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, CYNTHIA		NAME		
STREET ADDRESS	9640 NW 7TH CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION, FL 33324		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWAGGER, LASHARA		NAME		
STREET ADDRESS	64 PLEASANT HILL LANE		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	Terry Moore	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GIBBS, VONICE		NAME	7850 SW 6th Ct	
STREET ADDRESS	300 LOCK ROAD		STREET ADDRESS	Plantation, FL 33324	
CITY-ST-ZIP	DEERFIELD BEACH, FL		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRIS, SOPHIE		NAME		
STREET ADDRESS	7220 NW 16TH ST.		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION, FL 33313		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	Madeline Oliver	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BYRD, CALVIN		NAME	7410 So. U.S Hwy 1	
STREET ADDRESS	300 LOCK ROAD, STOP 5420		STREET ADDRESS	Port St. Lucie, FL 34952	
CITY-ST-ZIP	DEERFIELD BEACH, FL		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Cynthia Evans</u>		Date <u>4-25-05</u>		Daytime Phone # <u>954 423-7428</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

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