

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33897

FILED  
Apr 22, 2007  
Secretary of State

**Entity Name:** ONE HUNDRED BLACK MEN OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

10022 HAMMOCKS BLVD  
#201  
MIAMI, FL 33196 US

**New Principal Place of Business:**

**Current Mailing Address:**

10022 HAMMOCKS BLVD  
201  
MIAMI, FL 33196 US

**New Mailing Address:**

**FEI Number:** 65-0138060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENRIQUEZ, STEVEN  
10022 HAMMOCKS BLVD., #201  
MIAMI, FL 33196 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: P ( ) Delete  
Name: HALL, BOBBY  
Address: 10022 HAMMOCKS BLVD #201  
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete  
Name: ADGER, ELLIS JR.  
Address: 15700 SW 153 COURT  
City-St-Zip: MIAMI, FL 33187

Title: T ( ) Delete  
Name: HENRIQUEZ, STEVEN  
Address: 10022 HAMMOCKS BLVD., #201  
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete  
Name: MCGHEE, RAYFIELD M JR  
Address: 18635 NW 42 PL.  
City-St-Zip: MIAMI, FL 33055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: STEVEN HENRIQUEZ

T

04/22/2007

Electronic Signature of Signing Officer or Director

Date