2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2006
Secretary of State

DOCUMENT# N37976

Entity Name: PEOPLE ACTING FOR COMMUNITY TOGETHER, INC.

Current Principal Place of Business:

250 NE 17TH TERRACE
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

250 NE 17TH TERRACE
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 65-0080062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DORFMAN, AARON C.
250 NE 17TH TERRACE
MIAMI, FL 33132 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: DP ( ) Delete
Name: FLOREAL, PREVAL REV.
Address: 6501 NORTH MIAMI AVE
City-St-Zip: MIAMI, FL 33150 US

Title: DV ( ) Delete
Name: WINEBRENNER, OPAL
Address: 5431 NW 167 ST
City-St-Zip: MIAMI, FL 33055 US

Title: DS ( ) Delete
Name: NAZCO, MARIA
Address: PO BOX 562022
City-St-Zip: MIAMI, FL 33256 US

Title: DT ( ) Delete
Name: BROWN, JIMMIE REV.
Address: 2001 NW 35 STREET
City-St-Zip: MIAMI, FL 33142 US

Title: DV (X) Delete
Name: STANKIEWICZ, HELEN
Address: 6263 NW 172 LN
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: STANKIEWICZ, HELEN
Address: 6563 NW 172 LANE
City-St-Zip: MIAMI, FL 33015 US

Title: DS (X) Change ( ) Addition
Name: LEBRETON, ROSEL
Address: 1200 NE 148 ST
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: DT (X) Change ( ) Addition
Name: NAZCO, MARIA
Address: 13201 NW 28 AVE., APT 213
City-St-Zip: MIAMI, FL 33054 US

Title: DV (X) Change ( ) Addition
Name: BAILEY, WILLIAM REV.
Address: 8350 NW 14TH AVE
City-St-Zip: MIAMI, FL 33147 US

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: AARON DORFMAN ED 08/23/2006
Electronic Signature of Signing Officer or Director — Date