


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2006 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # N92000000459</b><br>1. Entity Name<br>THE NEHEMIAH PROJECT OF HOMESTEAD, INC. |  |
|---|---|

|  |  |
|--|--|
| Principal Place of Business<br>30695 SW 162ND AVE<br>HOMESTEAD, FL 33033 | Mailing Address<br>30695 SW 162ND AVE<br>HOMESTEAD, FL 33033 |
|--|--|

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03102006 No Chg-NP CR2E037 (11/05)

|                             |                               |
|-----------------------------|-------------------------------|
| 4. FEI Number<br>65-0389868 | Applied For<br>Not Applicable |
|-----------------------------|-------------------------------|

|                                  |  |
|----------------------------------|--|
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
|----------------------------------|--|

6. Name and Address of Current Registered Agent

GOERTZ, CHARLES  
 30695 SW 162 AVENUE  
 HOMESTEAD, FL 33033

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>FERNANDEZ, EMILIO<br>416 BIANCA AVE<br>CORAL GABLES, FL 33146 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | M<br>AZAN, LUIS<br>2701 SEQUOIA ST<br>CORAL GABLES, FL              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TV<br>GOERTZ, CHARLES<br>30695 SW 162 AVENUE<br>HOMESTEAD, FL 33033 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SD<br>ALFAU-REYES, MARIA<br>888 NE 30TH ST.<br>MIAMI, FL 33137      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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 03/29/06-80001-014 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Luis J. Azan, Exec Director 3/13/06 305245-5885  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #