## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003402

FILED Jul 21, 2006 Secretary of State

Entity Name: OVERTOWN MERCHANTS' ALLIANCE, INC.

urrent F	Principal Place of Business:	New Principal Place of Business:
133 NW IIAMI, FL	3RD AVENUE - 33136 US	
urrent N	Mailing Address:	New Mailing Address:
	3RD AVENUE 33136 US	
	r: 65-0475727 FEI Number Applied Fo nce with s. 607.193(2)(b), F.S., the corporation	
ame and	d Address of Current Registered Ag	ent: Name and Address of New Registered Agent:
133 NW IIAMI, FL	3RD AVENUE . 33136 US	
		for the purpose of changing its registered office or registered agent, or both,
the Stat	te of Florida.	for the purpose of changing its registered office or registered agent, or both,
the Stat	te of Florida.	
the Stat	te of Florida. The state of Florida.	
the Stat IGNATU	te of Florida.  IRE:  Electronic Signature of Registe	red Agent Date
the Stat GNATU FFICER le: ume: dress:	te of Florida.  IRE:  Electronic Signature of Registe  RS AND DIRECTORS:  PD () Delete  WILLIAMS, WILLIE L SR  1133 NW 3RD AVENUE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO  Title: ( ) Change ( ) Addition Name: Address:
the Stat GNATU  FFICER le: me: dress: y-St-Zip: le: me: dress:	te of Florida.  JRE:  Electronic Signature of Registe  S AND DIRECTORS:  PD () Delete  WILLIAMS, WILLIE L SR 1133 NW 3RD AVENUE  MIAMI, FL 33136 US  DV () Delete  ROBINSON, EARL 500 NW 11TH STREET	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO  Title: ( ) Change ( ) Addition  Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition  Name: Address:

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: WILLIE L WILLIAMS SR PD 07/21/2006