2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# N94000000084

Entity Name: OPEN DOOR COUNSELING CENTER, INC.

Current Principal Place of Business:

515 S.W. 12TH AVE.
SUITE 521
MIAMI, FL 33130 US

New Principal Place of Business:

1393 SW FIRST STREET
SUITE 206
MIAMI, FL 33135 US

Current Mailing Address:

515 S.W. 12TH AVE.
SUITE 521
MIAMI, FL 33130 US

New Mailing Address:

1393 SW FIRST STREET
SUITE 206
MIAMI, FL 33135 US

FEI Number: 65-0459608 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDEZ, RAFAEL A
515 S.W. 12TH AVE.
SUITE 521
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

MENDEZ, RAFAEL A
1393 SW FIRST STREET
SUITE 206
MIAMI, FL 33135 US

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: RAFAEL A. MENDEZ 05/01/2003
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MENDEZ, RAFAEL A M.A.
Address: 515 SW 12TH AVE. #521
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete
Name: GRANADOS, DONALD
Address: 515 SW 12TH AVE. #521
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete
Name: PALMER, CHERIE
Address: 515 S.W. 12TH AVE. #521
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MENDEZ, RAFAEL A M.A.
Address: 1393 SW FIRST STREET #206
City-St-Zip: MIAMI, FL 33135 US

Title: TD (X) Change ( ) Addition
Name: GRANADOS, DONALD
Address: 1393 SW FIRST STREET # 206
City-St-Zip: MIAMI, FL 33135 US

Title: SD (X) Change ( ) Addition
Name: PALMER, CHERIE
Address: 1393 SW FIRST STREET # 206
City-St-Zip: MIAMI, FL 33135 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAFAEL A. MENDEZ PD 05/01/2003
Electronic Signature of Signing Officer or Director Date