2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

DOCUMENT# N94000000453

Entity Name: MAINSTREAMING PLUS, INC.

Current Principal Place of Business:

111 N W 183 STREET
514
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

111 N W 183 STREET
514
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 65-0465829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEE, DICK ESQ
2701 S. BAYSHORE DRIVE., STE 605
COCONUT GROVE, FL 33133 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: PD ( ) Delete
Name: BREWSTER, ANNABEL
Address: 111 N W 183 STREET, #514
City-St-Zip: MIAMI, FL 33169

Title: SD ( ) Delete
Name: AGHINA, HENRY
Address: 9625 N.W. 148TH PLACE
City-St-Zip: MIAMI, FL 33196

Title: CD ( ) Delete
Name: NWADIKE, EMMANUEL
Address: 12938 S.W. 133RD COURT
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: GIBSON, SHIRLEY
Address: 251 N.W. 196TH STREET
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete
Name: YAP, GEORGE
Address: 2450 N.W. 76TH STREET
City-St-Zip: MIAMI, FL 33147

Title: ED ( ) Delete
Name: TANG, VENGHAN
Address: 8401 S.W. 107TH AVENUE
City-St-Zip: MIAMI, FL 33173

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:

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: ANNABEL BREWSTER PD 03/07/2006

Electronic Signature of Signing Officer or Director — Date