2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# N94000001394

Entity Name: POSSIBILITIES FOUNDATION, INC.

Current Principal Place of Business:

14895 NE 20TH AVE.
N. MIAMI, FL 33181 US

New Principal Place of Business:

19732 N. E. 12TH PLACE
N. MIAMI BEACH, FL 33179 US

Current Mailing Address:

14895 NE 20TH AVE.
N. MIAMI, FL 33181 US

New Mailing Address:

P. O. BOX 612172
N. MIAMI, FL 33261 US

FEI Number: 65-0507245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ST. JOHN, GREGORY
2601 S. BAYSHORE DRIVE
SUITE 1600
MIAMI, 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: TD ( ) Delete
Name: ST. JOHN, GREGORY
Address: 2601 S. BAYSHORE DRIVE, SUITE 1600
City-St-Zip: MIAMI, FL

Title: PD ( ) Delete
Name: SEQUENZIA, CHRISTINE
Address: 14895 NE 20TH AVE.
City-St-Zip: N. MIAMI, FL 33181

Title: SD ( ) Delete
Name: SEQUENZIA, VEN
Address: 14895 NE 20TH AVE.
City-St-Zip: N. MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: SEQUENZIA, CHRISTINE
Address: 19732 N. E. 12TH PLACE
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: SD (X) Change ( ) Addition
Name: SEQUENZIA, VEN
Address: 19732 N. E. 12TH PLACE
City-St-Zip: N. MIAMI BEACH, FL 33179

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: VEN SEQUENZIA SD 04/28/2003

Electronic Signature of Signing Officer or Director — Date