## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000005704

FILED Jan 14, 2005 Secretary of State

Entity Name: FELLOWSHIP HOUSE EMPLOYMENT SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 5711 SOUTH DIXIE HIGHWAY SOUTH MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 5711 SOUTH DIXIE HIGHWAY SOUTH MIAMI, FL 33143 FEI Number: 65-0539118 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GIAMPAOLO, JOHN C VP ADM 5711 S. DIXIÉ HWY MIAMI, FL 33143 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SANTANA, PÙBLIO M Name: Name: 5711 S DIXIE HWY Address: Address: City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: Title: () Delete Title: () Change () Addition Name: OLLER, VIRAMA Name: Address: 5711 SOUTH DIXIE HIGHWAY Address: City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: Title: () Delete Title: () Change () Addition GIAMPAOLO, JOHN Name: Name: 5711 SOUTH DIXIE HIGHWAY Address: Address: City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: MARX, GENNA Name: SMITH-HOEL, ROSEMARY 5711 SOUTH DIXIE HIGHWAY Address: Address: 5711 SOUTH DIXIE HIGHWAY City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: SOUTH MIAMI, FL 33143

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: JOHN GIAMPAOLO VP 01/14/2005