2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000097

FILED Apr 18, 2005 Secretary of State

Entity Name: A.C.T. FOR HOWARD DRIVE, INC. **Current Principal Place of Business: New Principal Place of Business:** 7750 S.W. 136 STREET MIAMI, FL 33158 **Current Mailing Address: New Mailing Address:** 7750 S.W. 136 STREET MIAMI, FL 33158 FEI Number: 65-0627544 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GROSSMAN, DAVID W ESQ GROSSMAN, DAVID W ESQ VERNIS & BÓWLING OF MIAMI, P.A. HDE - ACT PROGRAM 1680 NE 135TH ST 7750 SW 136 STREET NORTH MIAMI, FL 33181 US MIAMI, FL 33158 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: 04/18/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LARKIN, ELYSE Name: Name: Address: 7901 SW 143 ST Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: ORSILLO, ANNE Name: Address: **7800 SW 139 TERRANCE** Address: City-St-Zip: MIAMI, FL 33158 City-St-Zip: Title: () Delete Title: (X) Change () Addition DHAPTRO, GAE Name: SHAPIRO, GAE Name: 7430 SW 132 ST Address: Address: 7430 SW 132 ST City-St-Zip: MIAMI, FL 33156 City-St-Zip: MIAMI, FL 33156 Title: VPD () Delete Title: () Change () Addition Name: WASSERMAN, FRED Name: Address: 3420 SW 70 AVE Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip:

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: GAE SHAPIRO P 04/18/2005