2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001071

Entity Name: PROJECT Y.E.S., INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5275 SUNSET DRIVE MIAMI, FL 331435919

Current Mailing Address: New Mailing Address:

5275 SUNSET DRIVE MIAMI, FL 331435919

FEI Number: 65-0646667 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:

FUGATE, MARTHA 6750 S.W. 59TH STREET MIAMI, FL 33143 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:

Flacture Company of Davidson d Asset

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 Title:
 DS
 () Delete
 Title:
 D.S
 (X) Change () Addition

 Name:
 ALLEN, NANCY
 Name:
 ALLEN, NANCY

 Address:
 6770 S.W. 59TH STREET
 Address:
 6770 S.W. 59TH STREET

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 33143

Title: T () Delete Title: DT (X) Change () Addition Name: OLDAKOWSKI, ROBERT DT (X) Change () Addition Name: OLDAKOWSKI, ROBERT

 Address:
 5275 SUNST DR
 Address:
 5275 SUNSET DR

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 33143

 $\label{eq:title:DC} {\sf Title:} \qquad {\sf DC} \qquad {\sf (i) Delete} \qquad \qquad {\sf Title:} \qquad {\sf DC} \qquad {\sf (X) Change (i) Addition}$

 Name:
 ROSS, BILL
 Name:
 DUGAN, TIM

 Address:
 1395 BRICKELL AVE 4TH FLOOR
 Address:
 5275 SUNSET DRIVE

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MIAMI, FL 33143

Title: DV () Delete Title: DVC (X) Change () Addition

 Name:
 BLACK, PAULA
 Name:
 BLACK, PAULA

 Address:
 3006 AVIATION AVE #3A
 Address:
 3006 AVIATION AVE #3A

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:
 MIAMI, FL 33133

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: TIM DUGAN DC 01/06/2004