## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N96000001071

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

**Current Principal Place of Business:** 

New Principal Place of Business:

FILED Jun 04, 2007

Secretary of State

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DS () Delete Title: () Change () Addition

 Name:
 BARDEN, MARYE C
 Name:

 Address:
 5275 SUNSET DRIVE
 Address:

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

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

 Address:
 5275 SUNSET DR
 Address:
 5275 SUNSET DR

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

Title: DC ( ) Delete Title: DT (X) Change ( ) Addition Name: BIRRITTELLA, TIM Name: PERE, JOSE LUIS

 Name:
 BIRRITTELLA, TIM
 Name:
 PERE, JOSE LUIS

 Address:
 5275 SUNSET DRIVE
 Address:
 1901 BRICKELL AVENUE # 1707

 Address:
 5275 SUNSET DRIVE
 Address:
 1901 BRICKELL AVENUE # 1707

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 33129

Title: DVC ( ) Delete Title: ( ) Change ( ) Addition Name: BLACK, PAULA Name:

 Name:
 BLACK, PAULA
 Name:

 Address:
 3006 AVIATION AVE #3A
 Address:

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT ODAKOWSKI DC 06/04/2007