

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N96000002300

1. Entity Name
ILE IBEJI CENTER FOR AFRICAN STUDIES, INC.



FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90041 009 ****70.00

Principal Place of Business
20820 N.W. MIAMI PLACE
MIAMI, FL 33169

Mailing Address
20820 N.W. MIAMI PLACE
MIAMI, FL 33169

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01232005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-3421138

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DESOUZA, DONNISE A ESQUIRE
12367 SW 145 STREET
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MYRIE, ALVARO
STREET ADDRESS 973 PRESIDENT ST., APT. 2B
CITY-ST-ZIP BROOKLYN, NY 11225

TITLE VP ☐ Delete
NAME JACKSON, ANTONIO
STREET ADDRESS 326 ST JOHN'S PL APT 3A
CITY-ST-ZIP BKLYN, NY

TITLE SD ☐ Delete
NAME MYRIE, ELVIA
STREET ADDRESS 9009 FIN 620 APT 2302
CITY-ST-ZIP AUSTIN, TX 78726

TITLE T ☒ Delete
NAME VERNON, VERONICA
STREET ADDRESS 20820 NW MIAMI PLACE
CITY-ST-ZIP MIAMI, FL

TITLE D ☐ Delete
NAME TURNQUEST, HENRIETTA
STREET ADDRESS 3471 CHERRY RIDGE PL
CITY-ST-ZIP DECATUR, GA

TITLE D ☐ Delete
NAME MORALES, BEATRIZ PHD
STREET ADDRESS 5288 GOLFCREST CIRCLE
CITY-ST-ZIP STONE MOUNTAIN, GA 30088

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TREASURER ☐ Change ☒ Addition
NAME TERRY WALLER
STREET ADDRESS 4298 PALM SPRINGS DRIVE
CITY-ST-ZIP EASTPOINT, GA 30344

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DIRECTOR ☒ Change ☐ Addition
NAME Veronica Vernon
STREET ADDRESS 20820 NW Miami Pl
CITY-ST-ZIP Miami, FL 33169

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Veronica Vernon