2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N97000000107

Entity Name: NEW BEGINNINGS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

2398 NW 119TH STREET
MIAMI, FL 33167 US

New Principal Place of Business:

Current Mailing Address:

2398 NW 119TH STREET
MIAMI, FL 33167 US

New Mailing Address:

FEI Number: 31-1476062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TAYLOR, MYRA MRS.
2398 NW 119TH STREET
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: TAYLOR, MYRA
Address: 2398 NW 119TH STREET
City-St-Zip: MIAMI, FL 33167

Title: D ( ) Delete
Name: DEAN, CHARLES
Address: 18810 NW 30TH COURT
City-St-Zip: MIAMI, FL 33055

Title: D ( ) Delete
Name: SMITH, ELVIRA
Address: 2131 NW 96TH STREET
City-St-Zip: MIAMI, FL 33147

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: TAYLOR, LILA E
Address: 2131 NW 96 STREET
City-St-Zip: MIAMI, FL 33147 US

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: MRS. MYRA TAYLOR D 05/01/2009

Electronic Signature of Signing Officer or Director — Date