

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000422

FILED  
Feb 03, 2006  
Secretary of State

Entity Name: BUTIFNOT INC.

**Current Principal Place of Business:**

1353 NW 67TH STREET  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

1353 NW 67TH STREET  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 31-1578604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GROSS, OLIVER L  
8500 NW 25TH AVENUE  
MIAMI, FL 33147 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: PD ( ) Delete  
Name: EDWARDS, THOMAS P  
Address: 15740 E. BUNCH PARK AVENUE  
City-St-Zip: OPA-LOCKA, FL 33054

Title: VPD ( ) Delete  
Name: GROSS, OLIVER L  
Address: 8500 N.W. 25TH AVENUE  
City-St-Zip: MIAMI, FL 33147

Title: SD ( ) Delete  
Name: NIXON, ANNIE F  
Address: 2831 NW 66TH STREET  
City-St-Zip: MIAMI, FL 33147

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNIE FRANCES NIXON

SD

02/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date