


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000001507
1. Entity Name
SISTERS AND BROTHERS FOREVER, INC.



Principal Place of Business 1925 SW 8 ST MIAMI, FL 33135 US	Mailing Address 1925 SW 8 ST MIAMI, FL 33135 US
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DO NOT WRITE IN THIS SPACE



03282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0750853	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**VILLALBA, JORGE S
6415 SOUTH WEST 133 COURT
MIAMI, FL 33183**

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VILLALBA, JORGE S 6415 SOUTH WEST 133 COURT MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TRUEBA, CARMINA 1545 TRILLO AVE. CORAL GABLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SEGUROLA, ALFREDO 12425 SW 14TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP PEREZ, NICOLAS 2454 SW 8 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CASAS, RAUL R 2046 SOUTH WEST 103 COURT MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC MESTRE, RAMON 2250 SW 131 PLACE MIAMI, FL 33182

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04/11/07-80061-012 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: JORJE S. VILLALBA  **MARCH 30 2007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #