2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR) -

Apr 11, 2006 8:00 am Secretary of State DOCUMENT # N97000002349 1. Entity Name 04-11-2006 90110 007 ****70.03 ANGELS FOR LIFE COMMUNITY OUTREACH CENTER Principal Place of Business Mailing Address 975 NE 87 ST 3147 NW 66 ST MIAMI FL 33147 **MIAMI FL 33147** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 65-0745796 Not Applicable Zip Country Z:o Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCRAY, NORCELL 975 NE 87TH STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33138** 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 privited name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. **PCEO** MILE Delete TITES ☐ Addition McRay, Norcell MCRAY, NORCELL NAME NAME 3147 NW 66 ST STREET ADDRESS STREET ADDRESS 975 NE 87 St. MIAMI FL 33147 CITY-ST-ZIP CITY-ST-ZIP **Delete** TITLE Change Addition McRay Anthony 975NE87St MCRAY, ANTHONY NAME NAME 3147 NW 66 ST STREET ADDRESS STREET ACCRESS MIAMI FL 33147 CITY - ST - ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE WALLS, IZELLA NAME STREET ADDRESS 4415 SW 153 AVE STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33027 CITY-ST-ZIP TITLE ☐ Defete ☐ Change ■ Addition NAME POITIER, MARCELL NAME STREET ADDRESS 19022 NW 57TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33169 CITY-ST-ZIP Delete DD TITLE TITLE Change ☐ Addition CLINCH, SYLVIA 3147 NW 66 STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33138 CITY-ST-ZIP CITY-ST-ZIP ADM ADM Change ☑ Delete TITLE ☐ Addition NAME DAVIS, COLONDVIA STREET ADDRESS 1532 NW 11954 #305 DAVIS, COLONDRIA NAME STREET ADDRESS 2401 NW 10 AVE MIAMI FL 33127 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33/67

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

FILED