

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90016 028 *****70.00

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03122007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0822970

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SKRLD, INC
201 ALHAMBRA CIRCLE
SUITE 1102
MIAMI, FL 33134

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, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	TOMCZK, JOHN	7650 SW 164 COURT	MIAMI, FL 33193				
TD	PEREZ, EVA	7707 SW 164 COURT	MIAMI, FL 33193	VPD			
DS	ALVAREZ, GEORGE	16551 SW 75TH ST	MIAMI, FL 33193	TD			
D	ESPINOSA, ERNA	16406 SW 77 TERRACE	MIAMI, FL 33193	SD			
VPD	KARNIB, JAMES	16512 SW 75 ST.	MIAMI, FL 33193	PD			

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: James Karnib, Pres. 3/27/07 (305) 386-9724
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #