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

DOCUMENT # N9700005272  1. Entity Name					May 04, 2006 08:00 AM Secretary of State			
NEW FUT	URA CORPORATION #12					·		
Principal Place of Business		Mailing Address						
201 NE 141 ST N. MIAMI FL 33161 US		201 NE 141 ST N. MIAMI FL 33161 US						
2. Principal Place of Business		3. Mailing Address				I IBILE IBBIL BBILL BBILL BRİLE BALL	? <b>2918  9   0   0  </b>   00  <b>0</b>   0	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			1st MOORE CR2E037 (10/05)			
City & Stat	ė	City & State		4. FEI Number	55-0969900	F 1 .	plied For t Applicab	
Z <sub>I</sub> p Country		Zip Co		ntry	5. Certificate of Status Desired			
	6. Name and Address of Curren	t Registered Agent			7. Name and Add	iress of New Registe	red Agent	
				Name				
201	RRAY, EDWARD N.E. 141ST STREET	•		Street Address (P.O. Box Number is Not Acceptable)				
N. N	/IIAMI FL 33161			City Zip Code				
8. The above	named entity submits this statement	for the purpose of changing	ıts registere	d office or register	red agent, or both, in	the State of Florida.	FL   I am familiar with,	and accep
the obligat	lions of registered agent.							
SIGNATURE	Signature, typed or printed name of registored age	nt and title if applicable (1	NOTE Registered	Agent signature required	f whon reinstating)	0	ATE	
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006		Campaign Fil nd Contribution		\$5.00 May Be Added to Fees	Make Cl Florida De	heck Payable	to State
10.	OFFICERS AND D	MRECTORS	11.		ADDITIONS/CHANG	 GES TO OFFICERS AN	D DIRECTORS IN	10
TITLE	P	Delete	TITLE		100,110,10,01,,110	20 10 071.021.07.1	☐ Change	Addition
NAME	MURRAY, EDWARD	Delcic	NAME					_
STREET ADDRESS	201 N.E. 141ST ST		STREE	T ADDRESS		U00000056230	i j	
CITY-ST-ZIP	N. MIAMI FL 33161		CITY -	ST-ZIP	05	/19/06-80051	-001 61.29	· }
TITLE	D	☐ Delete	TITLE				☐ Change	Addiji
NAME	RANKIN, MICHELLE		NAME					
STREET ADDRESS	203 NE 141 ST			T ADDRESS				
CITY-ST-ZIP	N. MIAMI FL 33161		CITY-	ST - ZIP		فسينف بالمعتزيل فيستني بسيساست		
TITLE	D	☐ Delete	TITLE				Change	Addiii
NAME	SANDS, CYNTHIA		NAME	<b>I</b>				
STREET ADDRESS	207 N.E. 141ST ST			T ADDRESS ST-ZIP				
CITY-ST-ZIP	N. MIAMI FL 33161			81-21				<u> </u>
TITLE	D STATE AND SECTION OF THE SECTION O	☐ Delete	IIILE				☐ Change	Aginton
NAME STREET ADDRESS	SMITH, NESE 9371 SOUTH HAMPTON PL		NAME Stree	T ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434			ST-ZIP				
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NAME		- Delete	NAME				onlige	
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NAME			NAME				-	
STREET ADDRESS			STREE	T ADDRESS				
CITY - ST- ZIP	<u> </u>		CITY-	ST-ZIP			=-	
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12. I hereby 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:

Ed Murrary