2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2003 8:00 am
Secretary of State
03-28-2003 90102 039 ****70.00

DOCUMENT # N97000006331

1. Entity Name
A-FAMILY'S CHOICE, INC.

Principal Place of Business	Mailing Address
16400 NE 19 AVE NORTH MIAMI BEACH FL 33162	16499 NE 19TH AVE #103 NORTH MIAMI BEACH FL 33162

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
16400 NE 19th Ave	16400 NE 19th Ave
Suite, Apt. #, etc.: N. M.B	Suite, Apt. #, etc.
City & State: N. M B Florida	City & State: N. M B Florida
Zip: 33162 Country: DADE	Zip: 33162 Country: DADE

4. FEI Number 65-0794050 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CANODY, CHARLES 111 NE 170 ST MIAMI FL 33162	Name: CHARLES CANADY Street Address (P.O. Box Number is Not Acceptable): 111 NE 170th Street City: N. M. B FL Zip Code: 33162

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: Charles Canady 3/26/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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	PD CANADY, CARLENE 16601 NORTHEAST 19TH AVENUE NORTH MIAMI BEACH FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CANADY, CARLENE 16400 N.E 19th Avenue North Miami Beach, Fl. 33162	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CANADY, CHARLES 16601 NORTHEAST 19TH AVENUE NORTH MIAMI BEACH FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CANADY, CHARLES 16400 N.E 19th Avenue North Miami Beach FL. 33162	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLTSHIRE, LESTER 16601 NORTHEAST 19TH AVENUE NORTH MIAMI BEACH FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Wiltshire, LESTER 16400 N.E 19th Avenue North Miami Beach Fl. 33162	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGN Charles Canady 3/26/03 (305) 947-8141