

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001838

FILED
Apr 07, 2006
Secretary of State

Entity Name: HARAMBEE INC.

Current Principal Place of Business:

11358 SW 167 STREET
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11358 SW 167 STREET
MIAMI, FL 33157

New Mailing Address:

PO BOX 972883
MIAMI, FL 33197

FEI Number: 65-0831769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DRISEN, ALANA
3410 PEAR TREE CIRCLE
FORT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

LETREN, PETAGAY
11358 SW 167 STREET
MIAMI, FL 33157 US

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.

SIGNATURE: PETAGAY LETREN

04/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DASENT, ALANA
Address: 3410 PEAR TREE CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D () Delete
Name: ABRAHAM, KESHIA
Address: 460 NE 126 STREET
City-St-Zip: MIAMI, FL 33161

Title: DP () Delete
Name: LETREN, PETAGAY
Address: 11358 SW 167TH STREET
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: BUNTON, HAROLD
Address: 10932 SW 161 STREET
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: CODY, CARLA
Address: 2002 SE 926 LANE
City-St-Zip: HOMESTEAD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MAHDI, KEVIN,
Address: 1216 DUNAD AVENUE
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Change () Addition
Name: ABRAHAM, KESHIA
Address: PO BOX 972883
City-St-Zip: MIAMI, FL 33197

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CODY, CARLA
Address: PO BOX 972883
City-St-Zip: MIAMI, FL 33197

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETAGAY LETREN

D

04/07/2006

Electronic Signature of Signing Officer or Director

Date