

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 18, 2005
Secretary of State

DOCUMENT# N98000004972

Entity Name: BROTHERS OF THE SAME MIND, INC.**Current Principal Place of Business:**4055 N.W. 17TH AVENUE
MIAMI, FL 33142**New Principal Place of Business:****Current Mailing Address:**4055 N.W. 17TH AVENUE
#2
MIAMI, FL 33142**New Mailing Address:****FEI Number:** 65-0870396 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SCOTT, ANTHONY
4844 NW 27 AE APT #2
MIAMI, FL 33142 US**Name and Address of New Registered Agent:**SCOTT, ANTHONY
4844 NW 27 AVE APT #2
MIAMI, FL 33142 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: _____

08/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: KXA, RAHSID
Address: 266 NW 26 ST
City-St-Zip: MIAMI, FL 33127**Title:** S () Delete
Name: PARHAM, JEWEL
Address: 9143 SW 77 AVE
City-St-Zip: MIAMI, FL 33156**Title:** T () Delete
Name: MCCASKILL, IVAN
Address: 1530 NW 63 ST
City-St-Zip: MIAMI, FL 331477934**Title:** D () Delete
Name: PIPPENS, L.Z.
Address: 4055 NW 77 AVE.
City-St-Zip: MIAMI, FL 33142**Title:** ED () Delete
Name: HAMIDULLAH, HANEEF
Address: 4055 NW 17 AVE.
City-St-Zip: MIAMI, FL 33142**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: RASHID, K. X A.
Address: 266 NW 26 ST
City-St-Zip: MIAMI, FL 33127**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T (X) Change () Addition
Name: PIPPENS, L.Z.
Address: 20710 NW 41 AVENUE ROAD
City-St-Zip: MIAMI, FL 33055**Title:** D (X) Change () Addition
Name: VARGAS, J. ANTHON
Address: 407 LINCOLN ROAD, SUITE 4B
City-St-Zip: MIAMI BEACH, FL 33139**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: K. X A. RASHID

P

08/18/2005

Electronic Signature of Signing Officer or Director

Date