

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006626

FILED
Apr 27, 2009
Secretary of State

Entity Name: NORTH DADE CONCERTED SERVICES, INC.

Current Principal Place of Business:

1830 NW 188TH TERRACE
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

1830 NW 188TH TERRACE
MIAMI, FL 33056

New Mailing Address:

FEI Number: 65-0926824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELCHER-MILLER, BERNICE O
1830 NW 188TH TERRACE
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, JOHN A
Address: 1830 NW 188 TERR
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: ARMBRISTER, VASHITI
Address: 16035 NW 28TH CT
City-St-Zip: MIAMI, FL 33054

Title: D () Delete
Name: JONES, KATHY
Address: 350 NW 158TH AVE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: BERNICE O.BELCHER-MILLER

DIRE

04/27/2009

Electronic Signature of Signing Officer or Director

Date