

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007245

FILED
Apr 30, 2004
Secretary of State**Entity Name:** CENTER FOR ADVANCEMENT RESTORATION AND EMPOWERMENT, INC.**Current Principal Place of Business:**18335 NW 7TH AVENUE
MIAMI, FL 33169**New Principal Place of Business:**651 NW 183RD ST
MIAMI, FL 33169**Current Mailing Address:**P.O. BOX 693576
MIAMI, FL 33169**New Mailing Address:**651 NW 183RD ST
MIAMI, FL 33169**FEI Number:** 65-0895687**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARRELL, WILLIE O
18910 NW 8TH COURT
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**STEWART, SYDNEY S MR
1271 NW 175 TERRACE
MIAMI, FL 33169 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: S ROBERT STEWART

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRELL, WILLIE O
Address: 18910 NW 8TH COURT
City-St-Zip: MIAMI, FL 33169

Title: P () Delete
Name: STEWART, S. ROBERT
Address: 1271 NW 175TH STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: CLARKE, VIN R
Address: 10260 SW 12TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: ROSE, PANSY E
Address: 2004 NW 38TH TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: S () Delete
Name: PANSY, ROSE
Address: 2004 NW 38 TERR
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: D () Delete
Name: MILLER, WINSTON
Address: 1040 SW 100TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLARKE, ANN-MARIE
Address: 11509 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33026

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

Title: D (X) Change () Addition
Name: YOUNG, KING G MR
Address: 2649 PINE TREE DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: D (X) Change () Addition
Name: BISNAUGHT, DAHLIA
Address: 6600 SW 185TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33332

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 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: DAHLIA BISNAUGHT

MRS

04/30/2004

Electronic Signature of Signing Officer or Director

Date