

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007245

FILED  
Apr 21, 2005  
Secretary of State

**Entity Name:** CENTER FOR ADVANCEMENT RESTORATION AND EMPOWERMENT, INC.

**Current Principal Place of Business:**

651 NW 183RD ST  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

651 NW 183RD ST  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 65-0895687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEWART, SYDNEY S MR  
1271 NW 175 TERRACE  
MIAMI, FL 33169 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: CLARKE, ANN-MARIE  
Address: 11509 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33026

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

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

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

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

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

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

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 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: PANSY ROSE

D

04/21/2005

Electronic Signature of Signing Officer or Director

Date