2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # NOROCOTOAS

sharing wit	'H ALL	THOUGHTFU	ILNESS.	INC.

UNIFORM BUSINESS REPORT DOCUMENT # N9800007245					Apr 28, 2003 8:00 am § Secretary of State			
1. Entity Nam SHARING	WITH ALL THOUGHTFULNES	SS, INC.			04-28-2003 90208	002 ****61.2	25	
8335 NW 7TH AVENUE P.O. BOX		Mailing Address P.O. BOX 693576 MIAMI FL 33169	OX 693576			<u> 1911: 19310 1151: 4188</u>	ı 2 111 1 32 1	
Principal Place of Business 3. Mailing Address								
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Stat	City & State City & State			00 0000001			olied For]
Zip Country		Zip	Zip Country		5. Certificate of Status Desired See Required Not Applicable			
	6 Name and Address of Current	Pagistered Agent	· 1	7 Name and A	ddraes of New Pagisters			ł
6. Name and Address of Current Registered Agent HARRELL, WILLIE O 18910 NW 8TH COURT MIAMI FL 33169		negistered Agent	Name	7. Name and A	7. Name and Address of New Registered Agent			
			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
			City		FL Zip Code			
	named entity submits this statement fo tions of registered agent.	r the purpose of changing its r	egistered office or r	egistered agent, or both,	in the State of Florida. I ar	m familiar with, a	nd accept	ĺ
SIGNATURE .								
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature	required when reinstating)	DATE			
FILE NOW: FEE IS \$61.25 9. Election Camp Trust Fund Co		· -	\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State					
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHAP	I IGES TO OFFICERS AND I	DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRELL, WILLIE O 18910 NW 8TH COURT MIAMI FL 33169	☐ Delete	NAME STREET ADDRESS	5 Pansy Ros 2004 NW: Lander Dan	e Se Terrace E lakes I	☐ Change E 333	Addition	5037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEWART, S. ROBERT 1271 NW 175TH STREET MIAMI FL 33169	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	CR2E00
TITLE NAME _ STREET ADDRESS	D CLARKE, VIN R 10260 SW 12TH STREET	☐ Delete	TITLE NAME STREET ADDRESS	·		Change	Addition	-
CITY-ST-ZIP TITLE NAME	PEMBROKE PINES FL 33025 D ROSE, PANSY E	☐ Delete	CITY-ST-ZIP TITLE NAME	<u></u>		☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	2004 NW 38TH TERRACE LAUDERDALE LAKES FL 33311		STREET ADDRESS CITY-ST-ZIP		<u></u>		<u> </u>	
title Name Street address City-St-Zip	S LYNCH, KARLENE 2311 BERMUDA DRIVE MIRAMAR FL 33023	⊠ , Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE	D MILLER WINSTON	☐ Delete	TITLE			☐ Change	☐ Addition	i

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS 1040 SW 100TH TERRACE

PEMBROKE PINES FL 33025

estell -120,206

FILED