

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001512

FILED
Mar 27, 2007
Secretary of State

Entity Name: THE SOUTH FLORIDA EMPLOYMENT TRAINING AND DEVELOPMENT CORPORATION

Current Principal Place of Business:

153 NE 97TH STREET
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

153 NE 97TH STREET
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 31-1640071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEVEILLE, ANTOINE
1225 NE 200 TERR
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

CHARLES, PIERRE
153 NE 97 STREET
MIAMI, FL 33138 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: PIERRE CHARLES

03/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, BRENDA
Address: 1975 NW 171 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VPD () Delete
Name: GARDNER, JAMES
Address: 18930 NW 11 AVENUE
City-St-Zip: MIAMI, FL 33169

Title: STD () Delete
Name: KNOWLES, TARSHALA
Address: 2010 NW 166 STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BUCHANAN, HOPE
Address: 153 NE 97 STREET
City-St-Zip: MIAMI SHORES, FL 33138

Title: D (X) Change () Addition
Name: WEATHERINGTON, ARNIE
Address: 153 NE 97 STREET
City-St-Zip: MIAMI SHORES, FL 33138

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

Title: D () Change (X) Addition
Name: DARLING, GERALD
Address: 153 NE 97 STREET
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Change (X) Addition
Name: WILLIAMS, VT
Address: 153 NE 97 STREET
City-St-Zip: MIAMI SHORES, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the 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: TARSHALA KNOWLES

STD

03/27/2007

Electronic Signature of Signing Officer or Director

Date