2096 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 28, 2006 8:00 am Secretary of State DOCUMENT # N99000001977 04-28-2006 90210 023 ****61.25 1. Entity Name ADOPTION ASSISTANCE SERVICES, INC. Principal Place of Business Mailing Address 125 N. 46TH AVE. 125 N. 46TH AVE. 60031004 HOLLYWOOD, FL 33021-6601 HOLLYWOOD, FL 33021-6601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 65-0999611 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOTTLIEB, BRUCE M ESQ. 125 N. 46TH AVE. Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD, FL 33021-6601 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE □ Delete TITLE Change Addition GOTTLIEB, BRUCE M NAME NAME STREET ADDRESS 125 N 46 AVENUE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GOTTLIEB, KAREN NAME NAME STREET ADDRESS 125 N 46 AVENUE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GOTTLIEB, SARI NAME NAME STREET ADDRESS 125 N 46 AVENUE STREET ADDRESS HOLLYWOOD, FL 33021 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of 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 fixe empowered.

FILED

4549667900

Daytime Phone #

Date



A Professional Association www.gottlieblaw.com

Bruce M. Gottlieb

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Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

April 26, 2006

RE: Adoption Assistance Services, Inc. - 2006 Annual Report

OUR FILE NUMBER: 4254

Gentlemen:

Enclosed, for filing with the Florida Department of State, is the 2006 Annual Report for Adoption Assistance Services, Inc., together with the filing fee of \$61.25.

Very truly yours,

GOTTLIEB & GOTTLIEB,

Bruce M. Gottlie

ATTORMEYS AT I

BMG/aw Enclosures