2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003747

FILED Jan 06, 2004 Secretary of State

Entity Name: FORCE-FACING OUR RISK OF CANCER EMPOWERED, INC.

Current P	rincipal Plac	ce of Business:	New Principal Pla	New Principal Place of Business:	
2900 UNIVERSITY DRIVE, SUITE 71 CORAL SPRINGS, FL 33071				1338 NW 100TH AVE CORAL SPRINGS, FL 33071	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
934 N UNI PMB 213 CORAL SF	VERSITY PRINGS, FL	33071			
FEI Number	: 65-0927702	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Addres	ss of New Registered Agent:	
SUITE 20 FORT LAU The above	ST CYPRESS JDERDALE,	FL 33309 US	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	onic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FRIEDMAN, \$ 1338 NW 100		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	HOROWITZ, 1338 NW 100		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (PEDERSON, 2810 E. LOS FRESNO, CA	ALTOS AVE.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MCKEE, LAU	NYVILLE RD.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	BEAUDOIN, O	ICREST DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PREDERGAS 1789 GLAZIE CONCORD, C	R DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: /SUE FRIEDMAN/ P 01/06/2004