2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 08, 2006 8:00 am Secretary of State

DOCUMENT # N9900004327								05-08-2006 90284 022 ****61.25				
1. Entity Name CRIME PREVENTION ALLIANCE OF SOUTH FLORIDA, INC.												
Principal Place of Business 1688 CORAL WAY -MIAMI, FL 33145			Mailing Address -1888 CORAL WAY MIAMI, FL 33145				4000.					
2. Principal P			3. Mailing Address									
Suite, Apt.		y	Suite, Apt. #, etc.				04272006 Chg-NP CR2E037 (4/06)					
City & State Migm: Fl			City & State Mami, Fl					4. FEI Number Applied For 73-1714960 Not Applicable				
Zip Country			7331L	33145				5. Certificate of Status Desired \$8.75 Addition Fee Required				
	6. Name	and Address of Current	Registered Ag	ent		Nome		7. Name and Add	ress of New Regi	stered Agent		
VARES, IN	IC:	2. 			ļ	Walle V	ares	es, Inc				
1 088 COR -MIAMI, FL		ag.		Street Address			ddiess (I	(P.O. Box Number is Not Acceptable)				
		3. 5.				City	•			FL Zpc	ode 100	
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) DATE												
	Signature, typeo	or printed name of registered agent	and tipe il applicable.	(NOTE	: Hegistered	- Agent signat	n.e .ednikeo	when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign Trust Fund Contribu					_		\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	1-00	OFFICERS AND DI			11.			ADDITIONS/CHANGE	S TO OFFICERS			
TITLE NAME	PGD Delete						Sano	thee, Basb	ara E	☐ Chang	e 🗌 Addition	
STREET ADDRESS	1688 COF	AL WAY		STREET.			1688 Coral Way Miani, Fl 33145					
CITY-ST-ZIP	MIAMI; FL	☐ Dalata	TITLE		VPD	imi, F1 33	(13	T1 Chang	e Addition			
NAME	BRADWE	LL, JOE	☐ Delete TIT				13/20	Sadwell, Loe			e 🗀 Xoullion	
STREET ADDRESS	1600 COF					ET ADDRESS		1688 Coral Way				
CITY-ST-ZIP TITLE	MIAMI, FL 33145 D					ST-ZIP	Diq.	mi, F1 331	45	☐ Chang	e 🖪 Addition	
NAME	1 -	RAYMOND-	1	∠ Delete	TITLE		Mad	Fruga, Luis 8 Coral Wa	2	- Chang	e 🔄 Modition	
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TITLE	-HASTING	S; GAR L	l	Delete	TITLE		_	tings, Carl		T Chang	e	
STREET ADDRESS	1 088 COF					ET AODRESS	148	8 Com I w	ay _			
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TITLE NAME				Delete	TITLE		Las	o 174man		☐ Chang	e Addition	
STREET ADDRESS						et address	168	a Coval wa	y			
CITY-ST-ZIP	-			—	-	·ST-ZiP	Mta	mi, F1 33/1	15		n Dadelston	
TITLE NAME			•	☐ Delete	TITLE					☐ Chang	e Addition	
STREET ADDRESS			Λ		STREE	et address						
CITY-ST-ZIP	<u> </u>		///_	A		-ST-ZIP	<u> </u>		11. 0		. 1.1. 0	
12. I hereby certify that the information supplied with this filling does not dualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental people 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 all address, with all other like impowered.												
SIGNATURE:												
5.51971	. 	SENATURE AND TYPED OR	PRINTED NAME OF	IGNING OFFICER	OR DIRECT	OR			Date	Daytime Phone	*	