2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Sep 11, 2007 8:00 am Secretary of State DOCUMENT # N99000004721 09-11-2007 90009 001 ***140.00 THE SOUTH FLORIDA BOYS CHOIR, INCORPORATED Principal Place of Business Mailing Address 9966 HIBISCUS ST 9966 HIBISCUS ST 66021902 MIAMI, FL 33157 MIAMI, FL 33157 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07062007 CR2E037 (12/06) Chq-NP City & State City & State 4. FEI Number Applied For 31-1671632 Not Applicable Zip Country 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 Name TURNBULL, HORACE 9966 HIBISCUS STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33157 City 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 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by September 14, 2007 Added to Fees 10. · OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE X Delete TITLE TD K Change ☐ Addition BROWN, FRIEDA L NAME NAME WILLIAMS, JAMES H. STREET ADDRESS 17954 FRANJO ROAD STREET ADDRESS 10029 SW 223 LANE CITY-ST-ZIP MIAMI, FL 33157 CITY-SI-ZIP MTAMI, FL 33190. ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME TOOKES, RONALD NAME STREET ADDRESS 10153 CIRCLE PLAZA WEST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 CITY-ST-ZIP TITLE 0--☐ Delete Change Addition. NAME LONDONO, ROBERT M STREET ADDRESS 14095 S DIXIE HWY STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

12. I hereby 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/s 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.

SIGNATURE: Ronald Tookes - Secretary

SIGNATURE and typed of Printed Name of Signing Officer or Director

08/17/07

(305) 234-8769

Daytime Phone #

FILED