2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000005927

FILED Jan 25, 2006 Secretary of State

Entity Name: TEACHING RESPONSIBILITY TO INNERCITY-KIDS, INC. **Current Principal Place of Business: New Principal Place of Business:** 3900 NW 179TH STREET P.O. BOX 170254 MIAMI, FL 33055 HIALEAH, FL 33017 **Current Mailing Address: New Mailing Address:** 3900 NW 179TH STREET PO.BOX 170254 HIALEAH, FL 33017 MIAMI, FL 33055 FEI Number: 65-0954192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREEN, OTIS GREEN, OTIS A D 3900 NW 179TH STREET 17530 NW 42ND AVE MIAMI, FL 33055 MIAMI, FL 33055 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: OTIS GREEN 01/25/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GREEN, EMMA Name: Name: Address: 10428 DEEPBROOK DRIVE Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GREENE, LARRY Name: Address: 4120 NW 179 ST Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: Title: () Delete Title: (X) Change () Addition GREEN, OTIS Name: GREEN, OTIS A Name: 3900 NW 179 ST P.O. BOX 170254 Address: Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: HIALEAH, FL 33017

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: OTIS GREEN D 01/25/2006