

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047359

FILED
May 30, 2008
Secretary of State

Entity Name: ANGEL AIDS CENTER, INC.

Current Principal Place of Business:

5605 NW 27TH CT
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

5605 NW 27TH CT
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMCHAND RAMRUP
12509 COLONY PRESERVE DRIVE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAMRUP, HANSRAM SR
Address: 5605 NW 27TH CT
City-St-Zip: LAUDERHILL, FL 33313

Title: SD (X) Delete
Name: RAMRUP, RAMSHAND
Address: 5605 NW 27TH CT
City-St-Zip: LAUDERHILL, FL 33313

Title: TD () Delete
Name: RAMRUP JR, HANSRAM
Address: 5605 NW 27TH CT
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: RAMRUP, SOMMATTIE
Address: 5605 NW 27TH CT
City-St-Zip: LAUDERHILL, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: RAMRUP, HANSRAM SR
Address: 1708 NE 4TH STREET
City-St-Zip: BOYNTON BEACH, FL 33435

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: RAMRUP JR, HANSRAM
Address: 1708 NE 4TH STREET
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D (X) Change () Addition
Name: RAMRUP, SOMMATTIE
Address: 1708 NE 4TH STRET
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HANSRAM RAMRUP

P

05/30/2008

Electronic Signature of Signing Officer or Director

Date