

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000137797

FILED
Apr 27, 2008
Secretary of State

Entity Name: SEVEN UNITED FAMILIES ENTERPRISES, INC.

Current Principal Place of Business:

13997 SW 155TH ST.
MIAMI, FL 33177

New Principal Place of Business:

400 EMSLIE TERRACE
ST. AUGUSTINE, FL 32095

Current Mailing Address:

P.O. BOX 771412
MIAMI, FL 33177

New Mailing Address:

400 EMSLIE TERRACE
ST. AUGUSTINE, FL 32095

FEI Number: 22-3916955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FOUNTAIN, LOIS R
Address: 13997 SW 155TH ST.
City-St-Zip: MIAMI, FL 33177

Title: VP () Delete
Name: FOUNTAIN, WILLIE J
Address: 13997 SW 155TH ST.
City-St-Zip: MIAMI, FL 33177

Title: VP () Delete
Name: FOUNTAIN, VILLIE J
Address: 13997 SW 155TH ST.
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: MELLIS, DIOLLO S
Address: 13997 SW 155TH ST.
City-St-Zip: MIAMI, FL 33177

Title: SD () Delete
Name: ROBINSON, AVARI
Address: 13997 SW 155TH ST.
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FOUNTAIN, LOIS R
Address: 400 EMSLIE TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: VP (X) Change () Addition
Name: FOUNTAIN, WILLIE J
Address: 400 EMSLIE TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: VP (X) Change () Addition
Name: FOUNTAIN, WILLIE J
Address: 400 EMSLIE TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: S (X) Change () Addition
Name: MORRIS, DIALLO S
Address: 400 EMSLIE TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: SD (X) Change () Addition
Name: FOUNTAIN, TRINITY K
Address: 400 EMSLIE TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

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: /LOIS FOUNTAIN

PRES

04/27/2008

Electronic Signature of Signing Officer or Director

Date