

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000038992

FILED
Apr 20, 2011
Secretary of State

Entity Name: OPA LOCKA - PARK CITY, INC.

Current Principal Place of Business:

C/O OPA LOCKA CDC
490 OPA LOCKA BLVD., SUITE 20
OPA LOCKA, FL 33054

New Principal Place of Business:

C/O OPA LOCKA CDC
490 OPA LOCKA BLVD., SUITE 20
OPA LOCKA, FL 33054 US

Current Mailing Address:

C/O OPA LOCKA CDC
490 OPA LOCKA BLVD., SUITE 20
OPA LOCKA, FL 33054

New Mailing Address:

C/O OPA LOCKA CDC
490 OPA LOCKA BLVD., SUITE 20
OPA LOCKA, FL 33054 US

FEI Number: 65-0421308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BALDWIN, STEPHANIE
C/O OPA LOCKA CDC
490 OPA LOCKA BLVD., SUITE 20
OPA LOCKA, FL 33054 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

OFFICERS AND DIRECTORS:

Title: D
Name: BARNETT, WILLIE
Address: 6600 N.W. 27 AVENUE - SUITE 109
City-St-Zip: MIAMI, FL 33147

Title: D
Name: MILLER, JERRY
Address: 8221 NW. 198 STREET
City-St-Zip: HIALEAH, FL 33015

Title: D
Name: WILSON, PAULETTE
Address: 15830 N.W. 17 COURT
City-St-Zip: OPA LOCKA, FL 33054

Title: PD
Name: WILLIAMS-BALDWIN, STEPHANIE
Address: 490 OPA LOCKA BLVD #20
City-St-Zip: OPA LOCKA, FL 33054

Title: D
Name: LOGAN, WILLIE
Address: 490 OPA LOCKA BLVD #20
City-St-Zip: OPA LOCKA, FL 33054

Title: D
Name: SABIR, NASHID
Address: 18350 N.W. SECOND AVENUE - FIFTH FLOOR
City-St-Zip: MIAMI, FL 33169

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE WILLIAMS-BALDWIN

VP

04/20/2011

Electronic Signature of Signing Officer or Director

_____ Date