

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003850

FILED
Apr 18, 2007
Secretary of State

Entity Name: FAMILIES OF MIAMI CORPORATION

Current Principal Place of Business:

4401 NW 2 AVE
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

540 EAST DRIVE
NORTH MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 65-0892468 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN-LOUIS, LUCNER
540 EAST DRIVE
NORTH MIAMI BEACH, FL 33162 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: PSTD () Delete
Name: JEAN-LOUIS, LUCNER
Address: 540 EAST DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: JEAN-LOUIS, LUCNER
Address: 540 EAST DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Change (X) Addition
Name: JEAN-LOUIS, FRANZLYNE
Address: 540 EAST DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCNER JEAN-LOUIS

PTD

04/18/2007

Electronic Signature of Signing Officer or Director

_____ Date