2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2014
Secretary of State
CC4389254131

DOCUMENT# N11000006212

Entity Name: IKANBME COMMUNITY CENTER, INC.

Current Principal Place of Business:

3143 NW 59 STREET
MIAMI, FL 33142

Current Mailing Address:

PO BOX 163824
MIAMI, FL 33116 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARK-LOUIS, REBECCA
3143 NW 59 STREET
MIAMI, FL 33142 US

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

Officer/Director Detail :

Title	SECR	Title	PT
Name	WILLIAMS, LISA Y	Name	CLARK-LOUIS, REBECCA
Address	PO BOX 163824	Address	P.O. BOX 163824
City-State-Zip:	MIAMI FL 33116	City-State-Zip:	MIAMI FL 33116
Title	D	Title	C
Name	ADAMS, AISHA	Name	JONES, LEVON
Address	3061 STONE CARRIAGE CIR - APT. X	Address	P.O. BOX 163824
City-State-Zip:	FAYETTEVILLE NC 28304	City-State-Zip:	MIAMI FL 33116
Title	C	Title	D
Name	ELMORE, MALCOLM	Name	BRIDGES, BERNARD L
Address	P.O. BOX 163824	Address	1861 NW 86 TERRACE
City-State-Zip:	MIAMI FL 33116	City-State-Zip:	MIAMI FL 33147

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

SIGNATURE: REBECCA CLARK-LOUIS PRESIDENT 05/01/2014

Electronic Signature of Signing Officer/Director Detail — Date