

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401.222.3

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

* In accordance with fee of \$77.00

to a penant Jee of the year		1.00		· · · · · · · · · · · · · · · · · · ·					
1. Corporate ID No.	2. Name of Corporation								
122910	A CHILD IS MISS		Lau	766					
3. State of Incorporation	1 '	Rbode Island - Street Addre	City	Zip					
FLORIDA	66 HOWLAND	AVENUE		E PROVIDENCE	02914				
5. Foreign corporation. Enter principal office address			City	State	Zip				
500 SOUTH EAST 17TH STREET, SUITE 101			FT. LAUDERDALE	FLORIDA	33316				
6. Brief Description of the character 7. NAMES AND ADDRESSE			tsland CHMENT) FILL IN SPACES B	EFORE USING ATTACH	MENTS				
President Name			Vice President Name BARRY MOWELL, BCC, DEPT. OF SOCIAL SCIENCES						
DAVID LINDEMANN, THE LINEMANN GROUP			Street Address						
Street Address 604 SW 8TH AVE			3501 SW DAVIE ROAD						
City	State	Zip	City	State	Zip				
FORT LAUDERDALE	FL	33315	DAVIE	FL	33314				
Secretary Name DARREN EPSTEIN, INVESTIGATIVE SERVICES			Treasurer Name JORIS JABOUIN, CPA, BANK UNITED						
Street Address 1220 SE 1ST AVE			Street Address 7815 NW 148TH STREET						
Cuy	State	Zip	City	State	Zip				
FORT LAUDERDALE	FL	33316	MIAMI LAKES	FL	33016				
			<i>TACHMENT) 🔽</i> FILL IN SPACES F						
THE NUMBER OF DIRECT	ORS OF A DOMEST	TC (RHODE ISLAND) CORPORATION SHALL NOT	BE LESS THAN THREE	(3). R.I.G.L. 7-6-23				
Director Name			Director Name						
SHERRY FRIEDLANDER			EDWIN MENA CPA						
Street Address			Street Address						
500 SE 17TH STREET			350 E LAS OLAS BLVD. SUITE 1420						
Cīḥ [.]	State	Zip	City	State	Ζψ				
FORT LAUDERDALE	FL	33316	FORT LAUDERDALE	<u> FL</u>	33301				
Director Name DEBORAH B TRACHT P.A.			Director Name RENEE QUINN, MELLON UNITED NATIONAL BANK						
Street Address 50 NE 26TH AVE, SUITE 204			Street Address 110 SE 6TH ST						
City	State	Zip	City	State	Zip				
POMPANO BEACH	FL	33062	FORT LAUDERDALE	FL	33301				
9. REGISTERED AGENT IN	RHODE ISLAND -	DO NOT ALTER - Cha	anges require filing of Form 6	41 - R.I.G.L. 7-6-13 / 7	7-6-78				
Agent Name			Address						
ALICE CHABES									
Address			City	Zip					
66 HOWLAND AVE			EAST PROVIDENCE	02914-	02914-3019				
This report was	t he signed by either	the President Vice P	resident, Secretary, Assistant Sec	retary. Treasurer, Receiv	ver or Trustee				
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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Date

David Lindemann

Print or Type Name of Officer

President

Title of Officer

Form 631 Rev. 12/06