

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007004

FILED
Mar 15, 2012
Secretary of State

Entity Name: MARAFIKI GLOBAL AIDS MINISTRY INC.

Current Principal Place of Business:

4007 N CYPRESS DR.
203
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

4007 N CYPRESS DR.
203
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 31-1586466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGANGA, JOHN M
4007 N CYPRESS DR., #203
POMPANO BEACH, FL 33069 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: PC
Name: NGANGA, JOHN M
Address: 4007 N CYPRESS DR., #203
City-St-Zip: POMPANO BEACH, FL 33069

Title: VVC
Name: KGABO, MOLAPO
Address: 110 MCCOOK WAY NW
City-St-Zip: KENNESAW, GA 301443160

Title: S
Name: CHAPMAN, PATRICIA
Address: 5797 HANDINGTONSHIRE LANE
City-St-Zip: DUBLIN, OH 43016

Title: T
Name: MUNGAI, BENSON K
Address: 5684 D. YORKHILL CT.
City-St-Zip: COLUMBUS, OH 43229

Title: D
Name: MUNGAI, FAITH W
Address: 4007 N CYPRESS DR., #203
City-St-Zip: POMPANO BEACH, FL 33069

Title: D
Name: HUDSON, DAVID MARI
Address: P.O. BOX 667645
City-St-Zip: POMPANO BEACH, FL 33069

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: JOHN M NGANGA

PC

03/15/2012

Electronic Signature of Signing Officer or Director

Date