

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005080

FILED
Apr 17, 2007
Secretary of State

Entity Name: INTERNATIONAL MINISTRY OF RESTORATION, INC.

Current Principal Place of Business:

555 JEFERSON DR
116
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

555 JEFERSON DR
116
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 65-1035787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLOS A AZEVEDO
555 JEFERSON DR
DEERFIELD BEACH, FL 33442 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: PD () Delete
Name: AZEVEDO, CARLOS A
Address: 555 JEFERSON DR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VD () Delete
Name: AZEVEDO, GRACE T
Address: 555 JEFERSON DR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T () Delete
Name: DE SOUSA COSTA, RITA
Address: 555 JEFERSON DR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S () Delete
Name: DE SOUSA COSTA, CLEIVANIR
Address: 555 JEFERSON DR
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: CARLOS A ZEVEDO

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date