## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006426

FILED Aug 12, 2005 Secretary of State

DOCON	1L111# 1101000000420		Secretary or State	
Entity Nai	me: SOLID ROCK TEMPLE OF FAITH MINIS	STRIES INT'L. INC.		
Current Principal Place of Business:		New Principal Place	of Business:	
	ERSTAR ROAD D, FL 32818			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	ERSTAR ROAD D, FL 32818			
	: 59-3752244 FEI Number Applied For ( ) ice with s. 607.193(2)(b), F.S., the corporation did not	FEI Number Not Applicable() receive the prior notice.	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
GUESSAN, KOFFI N 6836 SILVERSTAR ROAD ORLANDO, FL 32818 US			N'GUESSAN, KOFFI 6836 SILVERSTAR ROAD ORLANDO, FL 32818 US	
	e named entity submits this statement for the po e of Florida.	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: KOFFI N'GUESSAN		08/12/2005	
	Electronic Signature of Registered Age	nt	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete N'GUESSAN, KOFFI 4899 WEST COLONIAL DRIVE ORLANDO, FL 32808	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete BAUPLAN, ULRICK 4899 WEST COLONIAL DRIVE ORLANDO, FL 32808	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete KOFFI, BROU S 4899 WEST COLONIAL DRIVE ORLANDO, FL 32808	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KOFFI N'GUESSAN P 08/12/2005