

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 28, 2007
Secretary of State**

DOCUMENT# N02000002418

Entity Name: E.S. MINISTRIES INC.

Current Principal Place of Business:102 MIMOSA ST.
ROYAL PALM BEACH, FL 33411**New Principal Place of Business:****Current Mailing Address:**102 MIMOSA ST.
ROYAL PALM BEACH, FL 33411**New Mailing Address:**

FEI Number: 50-0003899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SANTIAGO, EDWIN
102 MIMOSA ST
ROYAL PALM BEACH, FL 33411 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: SANTIAGO, EDWIN PD
Address: 102 MIMOSA ST.
City-St-Zip: ROYAL PALM BEACH, FL 33411Title: VD () Delete
Name: SANTIAGO, ZELIDED VD
Address: 102 MIMOSA ST.
City-St-Zip: ROYAL PALM BEACH, FL 33411Title: TD () Delete
Name: ANGEL, VAZQUEZ TD
Address: 4570 KELMAR DRIVE
City-St-Zip: WPB, FL 33415Title: DT () Delete
Name: BHAJAN, WILLIAM DIR
Address: 102 MIMOSA ST.
City-St-Zip: WEST PALM BEACH, FL 33411Title: VD () Delete
Name: KERWIN, SANTIAGO VD
Address: 4370 FOREST LANE
City-St-Zip: PALM SPRINGS, FL 33406Title: TD () Delete
Name: HERNANDEZ, WILLIAM
Address: 102 MIMOSA ST
City-St-Zip: ROYAL PALM BEACH, FL 33411**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DT (X) Change () Addition
Name: JOBITA, CRESPO COOR
Address: 102 MIMOSA ST.
City-St-Zip: ROYAL PALM BEACH, FL 33411Title: () 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 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: EDWIN SANTIAGO

PD

06/28/2007

Electronic Signature of Signing Officer or Director

Date