2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2007
Secretary of State

DOCUMENT# N02000006755

Entity Name: GLORY OF GOD FOUNDATION CORP.

Current Principal Place of Business:

4714 S.W. 67 AVENUE, UNIT C-11
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

4714 S.W. 67 AVENUE, UNIT C-11
MIAMI, FL 33155

New Mailing Address:

FEI Number: 81-0584403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAMORA, GEORGE S
3191 CORAL WAY
404
MIAMI, FL 33145 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: P ( ) Delete
Name: VADIA, MARIA
Address: 4714 S.W. 67 AVENUE C-11
City-St-Zip: MIAMI, FL 33155

Title: V ( ) Delete
Name: BEATO, CRISTINA
Address: 5031 MAGGIORE ST.
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: BEATO, JORGE DR.
Address: 5031 MAGGIORE ST.
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: MENENDEZ, CORA MRS.
Address: 175 S.W. 24 ROAD
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete
Name: DOYLE, DAN FATHER
Address: 4921 LINCOLN ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: ROSELL, INA
Address: 1220 ALEGRIANO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

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:

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: MARIA VADIA PRES 04/03/2007

Electronic Signature of Signing Officer or Director — Date