

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004208

FILED  
Jan 24, 2008  
Secretary of State

Entity Name: IN ONE ACCORD MINISTRIES, INC.

**Current Principal Place of Business:**

8919 TAFT STREET  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

8919 TAFT STREET  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

8919 TAFT ST  
PEMBROKE PINES, FL 33024

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, ALBERTO JR  
11400 SOUTH POINT DRIVE  
COOPER CITY, FL 33026 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: O/T ( ) Delete  
Name: RODRIGUEZ, DENORA  
Address: 11400 SOUTH POINT DRIVE  
City-St-Zip: COOPER CITY, FL 33026

Title: O/T ( ) Delete  
Name: RODRIGUEZ, ALBERTO SR  
Address: 8919 TAFT STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: O/T ( ) Delete  
Name: RODRIGUEZ, ZORAIDA  
Address: 8919 TAFT STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: O/T ( ) Delete  
Name: RODRIGUEZ, ALBERTO JR  
Address: 11400 SOUTH POINT DRIVE  
City-St-Zip: COOPER CITY, FL 33026

**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 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: ALBERTO RODRIGUEZ, JR.

O/T

01/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date