2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005171

FILED Mar 13, 2008 Secretary of State

Entity Name: OR YISRAEL INTERNATIONAL HOUSE OF PRAYER, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
713 PALMO LAKELAND	ORE CT D, FL 33813	US			
Current Mailing Address:			New Mailing Address:		
713 PALMO _AKELANE	ORE CT D, FL 33813	US			
FEI Number:	20-0974834	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
	ORE CT D, FL 33813	US			
	named entity of Florida.	submits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR					
	Electror	nic Signature of Registered Ager	nt		
		ne dignature of registered Ager	IL.	Date	
OFFICERS	S AND DIREC			Date ES TO OFFICERS AND DIRECTORS:	
Γitle: Name: Address:	P (MARCUM, GAE 5315-54 MONT	TORS:			
Title: Name: Address: City-St-Zip: Title: Name: Address:	P (MARCUM, GAE 5315-54 MONT DELRAY BEAC	TORS:) Delete BRIELLA TEREY CIRCLE CH, FL 33410 US) Delete	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:	
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip:	P (MARCUM, GAE 5315-54 MONT DELRAY BEAC D (REED, LINDA 713 PALMORE LAKELAND, FL D (PREDOVICH, S 16397 GLORY	ETORS:) Delete BRIELLA TEREY CIRCLE CH, FL 33410 US) Delete ECT . 33813 US) Delete SHARON	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS: () Change () Addition	

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: SHARON PREDOVICH OFF 03/13/2008