2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N06000006365

Entity Name: FAITH FAMILY CHAPEL INC.

Current Principal Place of Business:

13351 NW 1ST AVE
MIAMI, FL 33168

New Principal Place of Business:

855 NE 125TH STREET
MIAMI, FL 33161

Current Mailing Address:

13351 NW 1ST AVE
MIAMI, FL 33168

New Mailing Address:

FEI Number: 20-5061145 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SANTANA, JUAN
13351 NW 1ST AVE
MIAMI, FL 33168 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: SANTANA, JUAN
Address: 13351 NW 1ST AVE
City-St-Zip: MIAMI, FL 33168

Title: VSD ( ) Delete
Name: SANTANA, BARBARA
Address: 13351 NW 1ST AVE
City-St-Zip: MIAMI, FL 33168

Title: TD ( ) Delete
Name: MATOS, ANNETTE
Address: 2240 SERVICE RD
City-St-Zip: OPA LOCKS, FL 33054

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MATOS, ANNETTE
Address: 2240 SERVICE RD
City-St-Zip: OPA LOCKS, FL 33054

Title: TD ( ) Change (X) Addition
Name: BROWN, KENYAKE
Address: 9121 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33147

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: BARBARA SANTANA VSD 04/29/2009

Electronic Signature of Signing Officer or Director — Date