

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007745

FILED
May 06, 2008
Secretary of State

Entity Name: GILEAD INTERNATIONAL MINISTRY INC.

Current Principal Place of Business:

1668 WEST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

600 SW 3RD STREET # 1130
POMPANO BEACH, FL 33060

Current Mailing Address:

721 LYONS RD #15103
COCONUT CREEK, FL 33063

New Mailing Address:

600 SW 3RD STREET # 1130
POMPANO BEACH, FL 33060

FEI Number: 26-0671607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SILVA, JULIO C
721 LYONS RD
15103
COCONUT CREEK, FL 33063 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: SILVA, JULIO C
Address: 721 LYONS RD # 15103
City-St-Zip: COCONUT CREEK, FL 33063

Title: V () Delete
Name: ALMEIDA, VLADIMIR
Address: 4509 NE 3RD
City-St-Zip: POMPANO BEACH, FL 33064

Title: T () Delete
Name: SOUZA, JOABE
Address: 1207 NW 27TH AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: S () Delete
Name: COSTA, CASSIANA
Address: 3370 BEAU RIVAGE DR # B-2
City-St-Zip: POMPANO BEACH, FL 33064

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: S (X) Change () Addition
Name: COSTA, CASSIANA
Address: 1000 EAST LAKES DR
City-St-Zip: POMPANO BEACH, FL 33064

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: JULIO CESAR DA SILVA

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date