

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010082

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: RWOMI NETWORK INC.

**Current Principal Place of Business:**

1649 S 21 AVENUE  
HOLLYWOOD, FL 32020

**New Principal Place of Business:**

**Current Mailing Address:**

4846 N UNIVERSITY DRIVE  
PMB 375  
LAUDERHILL, FL 33351

**New Mailing Address:**

FEI Number: 45-4688672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RESTORATION WORLD OUTREACH MINISTRIES INC.  
1649 S 21 AVENUE  
HOLLYWOOD, FL 33020 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  
Name: LYSTON, STEVE  
Address: 7594 OAKGROVE CIRCLE  
City-St-Zip: LAKEWORTH, FL 33467

Title: VP  
Name: LYSTON, MICHELLE  
Address: 7594 OAKGROVE CIRCLE  
City-St-Zip: LAKEWORTH, FL 33467

Title: D  
Name: GRANT, CAROLYN  
Address: 9413 NW 42ND STREET  
City-St-Zip: SUNRISE, FL 33351

Title: D  
Name: BROTHERTON, NADRA  
Address: 17716 38TH LANE N  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D  
Name: MALCOLM, MARVALYN  
Address: 55 NE 186TH TERRACE  
City-St-Zip: MIAMI GARDENS, FL 33179

Title: D  
Name: GREEN, NATALIE  
Address: 3173 NW 43RD STREET  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

I hereby 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 all other like empowered.

SIGNATURE: STEVE LYSTON

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date