2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# N26782

Entity Name: EBENEZER ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

1600 S.W. 5TH PLACE
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

1600 S.W. 5TH PLACE
FT. LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0120343 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HODGES, PERRY W.
644 SOUTHEAST 4TH AVENUE
FT. LAUDERDALE, FL 33301 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: NUMA, PREVOIT (REV),
Address: 1600 SW 5TH PLACE
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: SD ( ) Delete
Name: MICHELENE, BENJAMIN
Address: 5309 MAOLISON ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD ( ) Delete
Name: SENATUS, PHILIPPE
Address: 5325 N.W. 16TH ST.
City-St-Zip: LAUDERHILL, FL 33313

Title: TD ( ) Delete
Name: SMITH, ROWENA
Address: 240 SW 29TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VP ( ) Delete
Name: SAMSON, NUMA
Address: 8220 SW 22ND ST APT D#311
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: TD (X) Change ( ) Addition
Name: BERTHONY, NUMA
Address: 4103 NW 39TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33309

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAMSON NUMA VP 04/26/2005
Electronic Signature of Signing Officer or Director — Date