## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000000982

FILED May 15, 2008 Secretary of State

Entity Name: PAX CATHOLIC COMMUNICATIONS, INC.

	rincipal Place of Business:	New Principal Place of Business:	
1779 NW 2 SUITE 1	28 ST.		
MIAMI, FL	33142 US		
Current M	lailing Address:	New Mailing Address:	
1779 NW 2 SUITE 1	28 ST.	1779 NW 28 ST. SUITE 1	
MIAMI, FL	33172 US	MIAMI, FL 33142 US	
	: 65-0478741 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did i	FEI Number Not Applicable ( ) Certificate of Status Desire traceive the prior notice.	ed ( )
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:	
The above	C ABLES, FL 33134 US named entity submits this statement for the	purpose of changing its registered office or registered agent	or both,
	e of Florida. 		
SIGNATUI	RE: Electronic Signature of Registered A	Deta	
	Flectronic Signature of Registered Ad		
	Electronic eignature er registerea / (	gent Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND D	RECTOR
Title: Name: Address:			RECTOR
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S AND DIRECTORS:  D () Delete FAVALORA, MOST REV. JOHN 9401 BISCAYNE BLVD.	ADDITIONS/CHANGES TO OFFICERS AND DI Title: ( ) Change ( ) Addition Name: Address:	RECTORS
Title: Name: Address: City-St-Zip: Title: Name: Address:	D () Delete FAVALORA, MOST REV. JOHN 9401 BISCAYNE BLVD. MIAMI SHORES, FL 33138  DP () Delete CUTIE, ALBERTO R REV. 1779 NW 28TH ST	ADDITIONS/CHANGES TO OFFICERS AND DI Title: ( ) Change ( ) Addition Name: Address: City-St-Zip: Title: ( ) Change ( ) Addition Name: Address:	RECTOR

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: REV. ALBERTO R. CUTIE DP 05/15/2008