2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000008438

1. Entity Name
FRESH START MINISTRIES INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
18900 NW 32 AVE C/O CALVIN CHIN MIAMI, FL 33169	846 NW 200TH ST C/O CALVIN CHIN MIAMI, FL 33169

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01052006 No Chg-NP CR2E037 (11/05)

4. FEI Number
14-1894139
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ARMSTRONG, CARMEL
3597 NW 83 LANE
SUNRISE, FL 33351

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	CHIN, CALVIN
STREET ADDRESS	846 NW 200TH ST
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	D
NAME	CHIN, BARON
STREET ADDRESS	135 NE 202 TERR, ROMONT BLDG, N
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	D
NAME	HENRY, WILLIAM
STREET ADDRESS	115 NW 202 TERR, #507
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	DS
NAME	LEWIS, DAISY
STREET ADDRESS	3980 NW 195 ST
CITY-ST-ZIP	MIAMI, FL 33055
TITLE	DV
NAME	ARMSTRONG, CARMEL
STREET ADDRESS	3597 NW 83 LANE
CITY-ST-ZIP	MIAMI, FL 33351
TITLE	DT
NAME	HYATT, SYBILL
STREET ADDRESS	8648 CLARIDGE DR
CITY-ST-ZIP	MIRAMAR, FL 33025

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01/23/06-80004-006 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carmel Armstrong 01/12/06 (305) 652-7069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #