

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007619

FILED
Mar 07, 2012
Secretary of State

Entity Name: SAFARI THROUGH THE WORD MINISTRIES INC.

Current Principal Place of Business:

5725 NW 114 PATH #102
DORAL, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

5725 NW 114 PATH #102
DORAL, FL 33178 US

New Mailing Address:

FEI Number: 57-1212057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVAREZ, JOSE E
5725 NW 114 PATH #102
DORAL, FL 33178 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
Name: ALVAREZ, JOSE
Address: 5725 NW 114 PATH #102
City-St-Zip: DORAL, FL 33178 US

Title: VPD
Name: GOMEZ, RAFAEL
Address: 7570 NW 113 PATH
City-St-Zip: DORAL, FL 33178 US

Title: STD
Name: ALVAREZ, MARY C
Address: 5725 NW 114 PATH #102
City-St-Zip: DORAL, FL 33178 US

Title: D
Name: PASSWATERS, DONALD
Address: 8315 NW 201 TERR
City-St-Zip: HIALEAH, FL 33015 US

Title: D
Name: PASSWATERS, MARIA
Address: 8315 NW 201 TERR
City-St-Zip: HIALEAH, FL 33015 US

Title: D
Name: GOMEZ, CATHERINE
Address: 7570 NW 113 PATH
City-St-Zip: DORAL, FL 33178 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: JOSE ALVAREZ

PD

03/07/2012

Electronic Signature of Signing Officer or Director

Date