

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000009217

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC9763326482**

**Entity Name:** A LIFE FOR A LIFE INTERNATIONAL INC.

**Current Principal Place of Business:**

5335 RAMONA BLVD  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

5549 FORT CAROLINE RD  
SUITE 165  
JACKSONVILLE, FL 32277 US

**FEI Number:** 94-3446039

**Certificate of Status Desired:** No

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

AVRAHAM, YOSEF B  
5549 FORT CAROLINE RD  
SUITE 165  
JACKSONVILLE, FL 32277 US

*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

**Officer/Director Detail :**

Title D, VP  
Name AVRAHAM, RUT  
Address 5549 FORT CAROLINE RD  
SUITE 165  
City-State-Zip: JACKSONVILLE FL 32277

Title T  
Name SPENCER HOLMAN  
Address 5549 FORT CAROLINE RD  
SUITE 165  
City-State-Zip: JACKSONVILLE FL 32277

Title SEC  
Name TIFFANY HOLMAN  
Address 5549 FORT CAROLINE RD  
SUITE 165  
City-State-Zip: JACKSONVILLE FL 32277

Title DIRECTOR  
Name GRIFFIN, LASUANDRA ASST  
Address 5549 FORT CAROLINE RD  
SUITE 165  
City-State-Zip: JACKSONVILLE FL 32277

Title PRESIDENT, APOSTLE  
Name AVRAHAM, YOSEF B  
Address 5549 FORT CAROLINE RD  
SUITE 165  
City-State-Zip: JACKSONVILLE FL 32277

*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:** YOSEF BEN AVRAHAM

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date