

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000003018

Entity Name: 7-DAYS PRAISE & WORSHIP MINISTRY, INC.**Current Principal Place of Business:**7027 W BROWARD BLVD
340
PLANTATION, FL 33317**Current Mailing Address:**7027 W BROWARD BLVD
340
PLANTATION, FL 33317**FEI Number:** 47-3497544**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALMYR, YONER
7027 W BROWARD BLVD
340
PLANTATION, FL 33317 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 PRESIDENT, PASTOR
Name VALMYR, YONER
Address 7027 W BROWARD BLVD
City-State-Zip: PLANTATION 33317

Title VP
Name VALMYR, MARIE CHRISTINE
Address 7027 W BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

Title ASST. SECRETARY
Name VALMYR, BENAHAH S
Address 7027 W BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

Title OFFICER
Name DESORMES, KENDRICK
Address 7027 W BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

Title TREASURER
Name VALMYR, DAREENA
Address 7027 W BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

Title OFFICER
Name VALMYR, DARREN
Address 7027 W BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

Title SECRETARY
Name PIERRE, YOLETTE
Address 7027 W. BROWARD BLVD
 340
City-State-Zip: PLANTATION FL 33317

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: YONER VALMYR**PRESIDENT****03/05/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date