


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # 704997 1. Entity Name NEW JERUSALEM IN ITS POWER, INC.	
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Principal Place of Business 1452 N.W. 58TH TERRACE MIAMI, FL 33142-2516	Mailing Address JANIE DAVIS 1176 N.W. 58 TERR. MIAMI, FL 33127
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DO NOT WRITE IN THIS SPACE



04032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-6151960	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JANIE
1176 N.W. 58TH TERRACE
MIAMI, FL 33127

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

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

000000898383
04/25/08-80086-008 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT DAVIS, JANIE B. 1176 N.W. 58TH TERRACE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STONE, BERTHA 5610 NW 23 AVE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, IZOLA 15341 N.W. 28TH COURT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, JOYCE A 2791 N.W. 154 TERR. MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, ANNIE L 3511 N.W. 177TH TERR MAIMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Janie Davis Janie Davis 04-09-08 305-757-3655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #