2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2007
Secretary of State

DOCUMENT# 729926

Entity Name: MIRACLE-FAITH REVIVALS CHURCH INC.

Current Principal Place of Business:

2726 15TH AVENUE
TAMPA, FL 33605 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 75494, N/A
TAMPA, FL 336750494 US

New Mailing Address:

FEI Number: 59-3069734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LOCKHART, WILLIAM E PASTOR
2608 N. 28TH STREET
TAMPA, FL 33605 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 ( ) Delete
Name: LOCKHART, REV. WILLI, AM E
Address: 2608 N. 28TH STREET
City-St-Zip: TAMPA, FL

Title: D ( ) Delete
Name: GHENT, JANET
Address: 5247 QUIET CREEK LANE
City-St-Zip: LAKELAND, FL 33811

Title: SD ( ) Delete
Name: DEJESUS, CYNTHIA A
Address: 2007 WARRINGTON WAY
City-St-Zip: TAMPA, FL 33619

Title: D (X) Delete
Name: RUFFIN, MABLE
Address: 2517 RAGINS LANE
City-St-Zip: PLANT CITY, FL 33567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CYNTHIA DEJESUS SD 05/18/2007

Electronic Signature of Signing Officer or Director — Date