

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856923

FILED
Jan 29, 2008
Secretary of State

Entity Name: AGAPE FORCE MIAMI, INC.

Current Principal Place of Business:

311 N.E. 78TH ST.
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

311 NE 78 ST. BOX 246
MIAMI, FL 33138 US

New Mailing Address:

FEI Number: 59-2241522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERVAIS, EDDY
100 NW 198 STREET
MIAMI, FL 33169 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: PDS () Delete
Name: GERVAIS, EDDY
Address: 100 NW 198 STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: POKORNI, THOMAS
Address: 7100 BALBOA BLVD UNIT 1105
City-St-Zip: VAN-NUYS, CA 91406

Title: DTS () Delete
Name: GERVAIS, EDDY
Address: 100 NW 198
City-St-Zip: MIAMI, FL 33162

Title: DT () Delete
Name: NOZILE, MICHAEL
Address: 1371 NE 114 TERR
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: HARWOOD, ROBERT
Address: 334 NE 58 TR
City-St-Zip: MIAMI, FL 33137

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:

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: EDDY GERVAIS

PDS

01/29/2008

Electronic Signature of Signing Officer or Director

Date