

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004651

FILED
Jan 14, 2009
Secretary of State

Entity Name: KARAZIM MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

1777 VENICE LN APT 136
MIAMI, FL 331811917

New Principal Place of Business:

1777 VENICE LN SUITE
136
MIAMI, FL 331811917

Current Mailing Address:

1777 VENICE LN APT 136
MIAMI, FL 331811917

New Mailing Address:

1777 VENICE LN SUITE
136
MIAMI, FL 331811917

FEI Number: 87-0757817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARMBRISTER, RAOUL
1777 VENICE LN APT 136
MIAMI, FL 331811917 US

Name and Address of New Registered Agent:

ARMBRISTER, RAOUL
1777 VENICE LN SUITE
136
MIAMI, FL 331811917 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: RAOUL ARMBRISTER

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: ARMBRISTER, RAOUL
Address: 1777 VENICE LN APT 136
City-St-Zip: MIAMI, FL 331811917

Title: VCVP () Delete
Name: WHITWORTH, DAVID
Address: 2382 KELMAN PL
City-St-Zip: DACULA, GA 300196872

Title: DS () Delete
Name: ARMBRISTER, KAREN
Address: 1777 VENICE LN APT 136
City-St-Zip: MIAMI, FL 331811917

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:

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: RAOUL ARMBRISTER

CP

01/14/2009

Electronic Signature of Signing Officer or Director

Date