

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007004

FILED
Sep 07, 2009
Secretary of State

Entity Name: MARAFIKI GLOBAL AIDS MINISTRY INC.

Current Principal Place of Business:

4007 N CYPRESS DR.
203
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

4007 N CYPRESS DR.
203
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 31-1586466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

NGANGA, JOHN M
2681 S. COURSE DR. #403
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

NGANGA, JOHN M
2681 S. COURSE DR. #203
POMPANO BEACH, FL 33069 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: _____

09/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: NGANGA, JOHN M
Address: 4007 N CYPRESS DR., #403
City-St-Zip: POMPANO BEACH, FL 33069

Title: VVC () Delete
Name: KGABO, MOLAPO
Address: 110 MCCOOK WAY NW
City-St-Zip: KENNESAW, GA 301443160

Title: S () Delete
Name: CHAPMAN, PATRICIA
Address: 5797 HANDINGTONSHIRE LANE
City-St-Zip: DUBLIN, OH 43016

Title: T () Delete
Name: MUNGAI, BENSON K
Address: 5684 D. YORKHILL CT.
City-St-Zip: COLUMBUS, OH 43229

Title: D () Delete
Name: MUNGAI, FAITH W
Address: 2681 S. COURSE DR. APT. 403
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: HUDSON, DAVID MARI
Address: P.O. BOX 667645
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: NGANGA, JOHN M
Address: 4007 N CYPRESS DR., #203
City-St-Zip: POMPANO BEACH, FL 33069

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: D (X) Change () Addition
Name: MUNGAI, FAITH W
Address: 4007 N CYPRESS DR., #203
City-St-Zip: POMPANO BEACH, FL 33069

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: JOHN M NGANGA

PC

09/07/2009

Electronic Signature of Signing Officer or Director

Date