## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000000779

FILED Apr 11, 2006 Secretary of State

Entity Name: BALZORA CONSULTING MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 6341 SW 3RD

MARGATE, FL 33068

Current Mailing Address: New Mailing Address:

6341 SW 3RD MARGATE, FL 33068

FEI Number: 65-0784482 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BALZORA, RENAUD 6341 SW 3RD

MARGATE, FL 33068 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:

Flateria Circular FD video I Arrel

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition Name: BALZORA, YOUDELINE Address: 1304 PELHAM Title: S (X) Change () Addition Name: BALZORA, YOUDELINE Address: 10362 NW 16 CT

City-St-Zip: POMPANO BEACH, FL 33068 City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BALZORA, NATHALIE
 Name:

 Address:
 6341 SW 3RD
 Address:

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:

Title: DC ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BALZORA, RENAUD
 Name:

 Address:
 6341 SW 3RD
 Address:

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:

 $\label{eq:title:DC} \mbox{Title:} \mbox{ DC } \mbox{ ( ) Delete} \mbox{ Title:} \mbox{ DC } \mbox{ (X) Change ( ) Addition}$ 

 Name:
 BALZORA, LULRICK
 Name:
 BALZORA, LULRICK

 Address:
 6341 SW 3RD
 Address:
 10362 NW 16 CT

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CESAR, EMMANUEL
 Name:

 Address:
 22672 SW 65 WAY
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LULRICK BALZORA DC 04/11/2006