2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 06, 2006 8:00 am **Secretary of State DOCUMENT # N00000005054** 03-06-2006 90027 049 ****61.75 HIS HEART INTERNATIONAL MINISTRIES, INC. 400226 Principal Place of Business Mailing Address 535 BONEFISH TR. 535 BONEFISH TR. BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135 2. Principal Place of Business 15351 BONEFISH TR 3. Mailing Address 15351 BONEFISH Suite, Apt. #, etc Suite, Apt. #, etc. 02232006 CR2E037 (11/05) Chg-NP 4. FEI Number 65-1038173 City & State Applied For City & State BONITA SPRINGS, FL BONITA Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired <u>34135</u> Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent B. PERALTA JosuE PERALTA, JOSUE B Street Address (P.O. Box Number is Not Acceptable) 535 BONEFISH TR **BONITA SPRINGS, FL 34135** BONEFISH 8. 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. I am familiar with, and accept the obligations of registered agent. Tosue B. Peraura, SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD ☐ Delete TITLE Change ... TITLE JOSUE B. PERALTA NAME PERALTA, JOSUE B NAME 15351 BONEFISH TR. STREET ADDRESS 535 BONEFISH TR. STREET ADDRESS BONITA SPRINGS, FL 34135 CITY-ST-ZIP BONITA SPRINGS CITY-ST-ZIP VP TITLE ☐ Delete TITLE TINA BULNES SOURT BULNES, TINA NAME NAME STREET ADDRESS 1322 FORESTLAKE DRIVE STREET ADDRESS WALDORF, HD 20603 CITY-ST-ZIP HINESVILLE, GA 31313 CITY-ST-ZIP STD ☐ Delete TITLE Change Change ☐ Addition TITLE PERALTA, JUDITH TUDITH PERALTA NAME NAME BONEFISH TR STREET ADDRESS 535 BONEFISH TR. STREET ADDRESS 15351 BONITA SPRINGS, FL 34135 CITY-ST-ZIP CITY-SI-ZIP Delete TITE F ☐ Change anilihhA [TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 truetee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

THILE

NAME

STREET ADDRESS CITY-ST-ZIP

Delete

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

TITLE

NAME STREET ADDRESS

☐ Change

☐ Addition

FILED