

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006025

FILED
May 01, 2008
Secretary of State

Entity Name: HAND OF GOD MINISTRIES, INC.

Current Principal Place of Business:

10370 SW 220 ST,
SUITE 131
MIAMI, FL 33190

New Principal Place of Business:

14181 SW 275 ST
HOMESTEAD, FL 33032

Current Mailing Address:

10370 SW 220 ST,
SUITE 131
MIAMI, FL 33190

New Mailing Address:

14181 SW 275 ST
HOMESTEAD, FL 33032

FEI Number: 01-0590534 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:

MIGNON, CLAIRE-MARIE
10370 SW 220 ST, SUITE 131
MIAMI, FL 33190 US

Name and Address of New Registered Agent:

MIGNON, CLAIRE-MARIE
14181 SW 275 ST
HOMESTEAD, FL 33032 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: CLAIRE-MARIE MIGNON

05/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIGNON, CLAIRE-MARIE
Address: 10370 S.W. 220 ST, SUITE 131
City-St-Zip: MIAMI, FL 33190

Title: VD () Delete
Name: JULIEANNE, PINDER PASTOR
Address: 730 N.E. 130 STREET
City-St-Zip: MIAMI, FL 3 3161

Title: SD () Delete
Name: PIERRE, PAOLA
Address: 8661 N.W. 4 TE #907
City-St-Zip: MIAMI, FL 33126

Title: TD () Delete
Name: JEAN, FREDERIQUE
Address: 4610 SW 157 TE
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MIGNON, CLAIRE-MARIE
Address: 14181 SW 275 ST
City-St-Zip: HOMESTEAD, FL 33032

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: PIERRE, PAOLA
Address: 8588 NW 1ST LN
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OD () Change (X) Addition
Name: BERNADEL, REGINE
Address: 104 N BERGEN PL
City-St-Zip: FREEPORT, NY 11520

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: CLAIRE-MARIE MIGNON

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date