

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007451

FILED
Mar 08, 2007
Secretary of State

Entity Name: REVIVING WORD MINISTRY, INC.

Current Principal Place of Business:

17230 N.W. 33RD CT.
OPA LOCKA, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

17230 N.W. 33RD CT.
OPA LOCKA, FL 33056 US

New Mailing Address:

FEI Number: 65-1112277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TATE, BERYL S
17230 N.W. 33RD CT.
OPA LOCKA, FL 33056 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: TATE, BERYL S
Address: 17230 N.W. 33RD CT.
City-St-Zip: OPA LOCKA, FL 33056 US

Title: PD () Delete
Name: TATE, BERYL S
Address: 17230 N.W. 33RD CT.
City-St-Zip: OPA LOCKA, FL 33056

Title: SD () Delete
Name: RILEY, TOMEKA
Address: 17230 N.W. 33RD CT.
City-St-Zip: OPA LOCKA, FL 33056

Title: TD () Delete
Name: TATE, YVONNE
Address: 17230 N.W. 33RD CT.
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: BERYL SABRINA TATE

CEO

03/08/2007

Electronic Signature of Signing Officer or Director

_____ Date