2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000717

City-St-Zip:

MIAMI, FL 33165

Entity Name: FAITH INTERNATIONAL FOR CHRIST, INC.

FILED Sep 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7900 SW 2455 MIAMI, FL 33155 **Current Mailing Address: New Mailing Address:** 7900 SW 2455 7900 SW 24 ST MIAMI, FL 33155 MIAMI, FL 33155 FEI Number: 65-1080095 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: TABLADA, SAMUEL 8785 SW 52 ST MIAMI, FL 33165 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TABLADA, SAMUEL Name: Name: Address: 8785 SW 5285 Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: TABLADA, NANCY G Name: JOSE, MIRANDA R Address: 8785 SW 52ND STREET Address: 15344 S.W. 63 TERR. City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: () Change () Addition OFODILE, KAYCE Name: Name: 1479 GREEN BANK CIRCLE WEST Address: Address: City-St-Zip: STONE MOUNTAIN, GA 30083 City-St-Zip: () Delete Title: BM Title: BM (X) Change () Addition GUTIERNEZ, ANGEL Name: Name: GUTIERREZ, ANGEL Address: 14141 SW 82 ST. Address: 14141 SW 82 ST. City-St-Zip: MIAMI, FL 33183 City-St-Zip: MIAMI, FL 33183 Title: BM () Delete Title: () Change () Addition NOEL, BELIZANIO Name: Name: 15020 NW 2 AVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: SAMUEL TABLADA PD 09/30/2004