

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90390 048 ****70.00

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1. Entity Name

MINISTRY IN MOTION, INC.



Principal Place of Business

Mailing Address

1320 N.W. 33 STREET
MIAMI FL 33142

1320 N.W. 33 STREET
MIAMI FL 33142

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1077133

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STRACHAN, YVONNE
1320 N.W. 33 STREET
MIAMI FL 33142

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME STRACHMAN, YVONNE REV.
STREET ADDRESS 1320 N.W. 33 STREET
CITY- ST- ZIP MIAMI FL 33142

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VPD ☒ Delete
NAME STRACHMAN, TIMOTHY
STREET ADDRESS 1320 N.W. 33 STREET
CITY- ST- ZIP MIAMI FL 33142

TITLE ☐ Change ☒ Addition
NAME VPD
STREET ADDRESS Joyce Evans Griffin
CITY- ST- ZIP 201 Kimberly Way Marietta Ga 30064

TITLE VPD ☐ Delete
NAME THOMAS, RANZER A REV
STREET ADDRESS 5384 SW 159 AVENUE
CITY- ST- ZIP MIRAMAR FL 33027

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE SD ☒ Delete
NAME SMITH, ISAAC
STREET ADDRESS 725 N.E. 178 TERRACE
CITY- ST- ZIP NORTH MIAMI BEACH FL 33162

TITLE ☐ Change ☒ Addition
NAME SD
STREET ADDRESS Peggy Bradley
CITY- ST- ZIP 4681 NW 164 Street Miami Gardens FL 33054

TITLE TD ☐ Delete
NAME THOMAS, RHONDA MICHELE
STREET ADDRESS 85 NE 213 STREET
CITY- ST- ZIP MIAMI FL 33179

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 trustee 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.

SIGNATURE

Yvonne Strachan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-18-07

786-443-7406

Date

Telephone Number