2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N01000002376

Entity Name: THE CLASH MINISTRIES, INC.

Current Principal Place of Business:

21376 MARINA COVE CIRC
C-17
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

21376 MARINA COVE CIRC
C-17
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 16-1669763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILES, DOUGLAS
20941 BAY CT, #126
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

GILES, DOUGLAS
21376 MARINA COVE CIRCLE
C17
AVENTURA, FL 33180 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: _____ 04/29/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GILES, DOUGLAS
Address: 20941 BAY CT, #126
City-St-Zip: AVENTURA, FL 33180

Title: DVS ( ) Delete
Name: GILES, MARY MARGARET
Address: 20941 BAY CT, #126
City-St-Zip: AVENTURA, FL 33180

Title: DT ( ) Delete
Name: PHILLIPS, PENNY
Address: 226 ANTIQUERA AVE #1
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GILES, DOUGLAS
Address: 21376 MARINA COVE CIRCLE
City-St-Zip: AVENTURA, FL 33180

Title: DVS (X) Change ( ) Addition
Name: GILES, MARY MARGARET
Address: 21376 MARINA COVE CIRCLE
City-St-Zip: AVENTURA, FL 33180

Title: DT (X) Change ( ) Addition
Name: CHAPLES, RICK
Address: 1543 GARFIELD
City-St-Zip: HOLLYWOOD, FL 33020

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: DOUGLAS GILES DP 04/29/2008
Electronic Signature of Signing Officer or Director — Date