

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003392

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** CREATIVE OUTREACH MINISTRIES ENTERPRISES INC.

**Current Principal Place of Business:**

2566 W 84TH ST  
HIALEAH, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

2470 NW 111 ST  
MIAMI, FL 33167

**New Mailing Address:**

**FEI Number:** 65-1110831

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALKER, JENNIFER  
2470 NW 111 ST  
MIAMI, FL 33167 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: PD  
Name: WALKER, FABIAN  
Address: 2470 NW 111TH ST  
City-St-Zip: MIAMI, FL 33167

Title: SD  
Name: WALKER, JENNIFER  
Address: 2470 NW 111TH ST  
City-St-Zip: MIAMI, FL 33167

Title: D  
Name: JACKSON, KAREN  
Address: 1420 NW 199TH ST.  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D  
Name: THOMPSON, WILLIE F  
Address: 20800 N.E. 12TH COURT  
City-St-Zip: MIAMI, FL 33179

Title: TD  
Name: MOXEY, FABIA K TRES  
Address: 10515 NW 32ND CT.  
City-St-Zip: MIAMI, FL 33147

Title: D  
Name: KNOWLES, WILLIE L  
Address: 201 SW 65TH WAY  
City-St-Zip: PEMBROKE, FL 33023

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER WALKER

SD

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date