

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006530

FILED
Apr 15, 2009
Secretary of State

Entity Name: MIAMI EVANGELISTIC ASSOCIATION, INC.

Current Principal Place of Business:

5405 S.W. 87TH AVE
MIAMI, FL 33165

New Principal Place of Business:

5405 S.W. 87TH AVE
MIAMI, FL 33165 US

Current Mailing Address:

5405 S.W. 87TH AVE
MIAMI, FL 33165

New Mailing Address:

5405 S.W. 87TH AVE
MIAMI, FL 33165 US

FEI Number: 60-0000873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, JAMES M
5405 SW 87TH AVE
MIAMI, FL 33165 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: D () Delete
Name: ABRAHAM, JAMES M
Address: 5405 S.W. 87TH AVE
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: CHIN, ALBERT
Address: 9810 SW 215 TERR.
City-St-Zip: MIAMI, FL 33189

Title: D () Delete
Name: SANG, KEITHSON C
Address: 9153 S.W. 206TH STREET
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABRAHAM, JAMES M
Address: 5405 S.W. 87TH AVE
City-St-Zip: MIAMI, FL 33165 US

Title: D (X) Change () Addition
Name: CHIN, ALBERT
Address: 9810 SW 215 TERR.
City-St-Zip: MIAMI, FL 33189 US

Title: D (X) Change () Addition
Name: SANG, KEITHSON C
Address: 9153 S.W. 206TH STREET
City-St-Zip: MIAMI, FL 33189 US

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: JAMES ABRAHAM

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date