

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008271

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: TABERNACLE.OF.ADONAI INC.

## Current Principal Place of Business:

14625 NW 7 AVENUE  
MIAMI, FL 33181

## New Principal Place of Business:

88 NW 54 ST  
MIAMI, FL 33127

## Current Mailing Address:

14625 NW 7 AVENUE  
MIAMI, FL 33181

## New Mailing Address:

88 NW 54 ST  
MIAMI, FL 33127

FEI Number: 65-1159803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GASPARD, FAUCETTE  
7068 N.W. 2ND AVENUE  
MIAMI, FL 33150 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: PS ( ) Delete  
Name: MEUS, POWER  
Address: 545 NE 121 ST  
City-St-Zip: MIAMI, FL 33181

Title: SD ( ) Delete  
Name: DORTELUS, JOSELYN  
Address: 14300 N.E. 10TH AVENUE  
City-St-Zip: MIAMI, FL 330

Title: TD ( ) Delete  
Name: OLISCO, ARNETTE  
Address: 14300 N.E. 10TH AVENUE  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: MEUS, POWER  
Address: 204 NE 26TH ST  
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD (X) Change ( ) Addition  
Name: DORTELUS, JOSELYN  
Address: 14300 N.E. 10TH AVENUE  
City-St-Zip: MIAMI, FL 33062

Title: TD (X) Change ( ) Addition  
Name: OLISCO, ARNETTE  
Address: 14300 N.E. 10TH AVENUE  
City-St-Zip: MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the 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: POWER MEUS

P

03/28/2006

Electronic Signature of Signing Officer or Director

Date