

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004170

FILED
Apr 07, 2006
Secretary of State

Entity Name: LAST CRY MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

5601 SW 8TH COURT
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

5601 SW 8TH COURT
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 03-0453413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARAIN, AUBRON
5601 SW 8TH COURT
PLANTATION, FL 33317 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: NARAIN, AUBRON
Address: 5601 SW 8TH COURT
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: NARAIN, YVONNE
Address: 5601 SW 8TH COURT
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: NARAIN, MARTY
Address: 1655 NW 56TH TERRACE
City-St-Zip: LAUDERHILL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AUBRON NARAIN

D

04/07/2006

Electronic Signature of Signing Officer or Director

Date