

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004812

Entity Name: HEART OF FIRE MINISTRIES, INC.

FILED  
Apr 26, 2004  
Secretary of State

**Current Principal Place of Business:**

14462 SW 285 TERR.  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

**Current Mailing Address:**

14462 SW 285 TERR.  
HOMESTEAD, FL 33033

**New Mailing Address:**

FEI Number: 81-0563269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PRATHAFTAKIS, ANTHONY C  
14462 SW. 285 TERR  
HOMESTEAD, FL 33033

**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: PRATHAFTAKIS, ANTHONY C  
Address: 14462 SW. 285 TERR  
City-St-Zip: HOMESTEAD, FL 33033

Title: D ( ) Delete  
Name: PRATHAFTAKIS, GLORIA M  
Address: 14462 SW. 285 TERR  
City-St-Zip: HOMESTEAD, FL 33033

Title: D ( ) Delete  
Name: KLAHR, DAVID L  
Address: 1021 N.W. 27TH COURT  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: KLAHR, DAVID L  
Address: 14462 S.W. 285TH TERRACE  
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY C. PRATHAFTAKIS

D

04/26/2004

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

\_\_\_\_\_  
Date