

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006228

FILED
May 30, 2008
Secretary of State

Entity Name: AGAPE ARTS INTERNATIONAL INC.

Current Principal Place of Business:

108 WINDRIDGE LANE
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

108 WINDRIDGE LANE
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 75-3087581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KOLTER, SUSANNE CLAIRE
108 WINDRIDGE LANE
PANAMA CITY BEACH, FL 32413 US

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 () Delete
Name: AGULAR, SANDRA
Address: 2770 WW DEVONSHIRE APT B9
City-St-Zip: HEMET, CA 92545

Title: DVP () Delete
Name: SULLIVAN, DEBBIE
Address: 225 DALTON
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: STD () Delete
Name: SULLIVAN, RANDY
Address: 225 DALTON
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T () Delete
Name: AGULAR, LEONARD
Address: 2770 W DEVONSHIRE APT B9
City-St-Zip: HEMET, CA 92545

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:

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

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: SUSANNE KOLTER

RA

05/30/2008

Electronic Signature of Signing Officer or Director

Date