## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000008220

STONE, SUSAYE

MIAMI, FL 33157

11233 SW 189TH LANE

Name:

Address:

City-St-Zip:

FILED Jun 22, 2005 Secretary of State

DOCOM	L     #	200000220		Secretary of State
Entity Nan	ne: LEVIKE	ELLY MINISTRIES, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	122ND PLAC N, FL 3303			
Current Mailing Address:			New Mailing Address:	
	122ND PLAC N, FL 3303			
FEI Number: In accordance		FEI Number Applied For() FEI Num 93(2)(b), F.S., the corporation did not receive t	nber Not Applicable() he prior notice.	Certificate of Status Desired ( )
Name and	Address of	Current Registered Agent:	Name and Address of	New Registered Agent:
FABIO, HERBERT 15832 SW 55TH TERRACE MIAMI, FL 33185 US			KELLY, LEVI 26223 SW 122 PLACE PRINCETON, FL 33032	2 US
The above in the State	named entity of Florida.	submits this statement for the purpose o	f changing its registered	office or registered agent, or both,
SIGNATURE: LEVI KELLY			06/22/2005	
	Electro	onic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( KELLY, LEVI 26223 SW 12 MIAMI, FL 33		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	DT ( PRATHER, JE 12270 SW 20 MIAMI, FL 33	2 STREET	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition
Title:	DS (	) Delete	Title: (	) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LEVI KELLY DP 06/22/2005