

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008572

FILED
Sep 02, 2008
Secretary of State

Entity Name: MOUNT ZION INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

9521 S. ORANGE BLOSSOM TRAIL
SUITE 109
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

9521 S. ORANGE BLOSSOM TRAIL
SUITE 109
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 11-3662222 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

OLIVEIRA, EDUARDO H
6649 MISSION CLUB BLVD
APT 101
ORLANDO, FL 32821 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: DPT () Delete
Name: OLIVEIRA, EDUARDO H
Address: 6649 MISSION CLUB BLVD APT 101
City-St-Zip: ORLANDO, FL 32821

Title: DVS () Delete
Name: OLIVEIRA, VALERIA M
Address: 6649 MISSION CLUB BLVD APT 101
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: GOMES, ALEX E
Address: 142 N. MCKINLEY
City-St-Zip: ORLANDO, FL 32811

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 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: EDUARDO OLIVEIRA

P

09/02/2008

Electronic Signature of Signing Officer or Director

Date