

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008818

FILED
May 07, 2008
Secretary of State

Entity Name: GLORY WORSHIP INSTITUTE, CORP.

Current Principal Place of Business:

12350 SW 132ND CT
SUITE # 106
MIAMI, FL 33186

New Principal Place of Business:

10195 SW 186TH ST
CUTLER BAY, FL 33157

Current Mailing Address:

12350 SW 132ND CT
SUITE # 106
MIAMI, FL 33186

New Mailing Address:

10195 SW 186TH ST
CUTLER BAY, FL 33157

FEI Number: 47-0897393 **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:

MACHIN, DORIS
22618 SW 94 PATH
MIAMI, FL 33190 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: PD () Delete
Name: MACHIN, DORIS
Address: 22618 SW 94 PATH
City-St-Zip: MIAMI, FL 33190

Title: VD () Delete
Name: CARRASQUILLO, MADELINE
Address: 9411 SW 227 LN
City-St-Zip: MIAMI, FL 33190

Title: TD () Delete
Name: MARIN, IDANIA
Address: 12254 SW 148TH TERRACE
City-St-Zip: MIAMI, FL 33186

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: DORIS MACHIN

PD

05/07/2008

Electronic Signature of Signing Officer or Director

Date