

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000000329
 1. Entity Name
JESUS PENTECOSTAL MINISTRIES INC



Principal Place of Business Mailing Address
 2801 NW 168TH TERR. 2801 NW 168TH TERR.
 OPA LOCKA, FL 33056 OPA LOCKA, FL 33056

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04222005 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
 90-0103778 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 WILLIAMS, VASIL
 2801 NW 168TH TERR.
 OPA LOCKA, FL 33056

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8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Vasil Williams* DATE: *4.22.05*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WILLIAMS, VASIL
STREET ADDRESS	2801 NW 168TH TERR.
CITY-ST-ZIP	OPA LOCKA, FL 33056
TITLE	D
NAME	PRICE, D.J.
STREET ADDRESS	2065 NW 15TH PL.
CITY-ST-ZIP	DELRAY BCH, FL 33445
TITLE	D
NAME	BROOKS, DIANA
STREET ADDRESS	19730 NW 40TH AVE.
CITY-ST-ZIP	MIAMI, FL 33055
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
 SIGNATURE: *Vasil Williams* DATE: *4.22.05*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #