2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# N03000000844

Entity Name: THE WAY MINISTRIES AND TEACHING CENTER, INC.

Current Principal Place of Business:

20106 N.W. 51ST CT.
MIAMI, FL 33055

New Principal Place of Business:

612 NW 167TH STREET
MIAMI, FL 33169

Current Mailing Address:

20106 N.W. 51ST CT.
MIAMI, FL 33055

New Mailing Address:

612 NW 167TH STREET
MIAMI, FL 33169

FEI Number: 59-3766733 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADEKUNLE, SHOLAKUNMI A
20106 N.W. 51ST CT.
MIAMI, FL 33055 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: D ( ) Delete
Name: GBADEBO, SAMUEL A
Address: 20106 N.W. 51ST CT.
City-St-Zip: MIAMI, FL 33055

Title: D ( ) Delete
Name: AINA, ALICE
Address: 7717 ALAHAMBRA BLVD.
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete
Name: KING, ADEJUMOKE
Address: 2241 SHERMAN CIRCLE SOUTH
City-St-Zip: MIRAMAR, FL 33025

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 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.

SIGNATURE: ADEKUNLE,SHOLAKUNMI RA 01/27/2005

Electronic Signature of Signing Officer or Director — Date