2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001929

City-St-Zip:

HALLANDALE, FL 33069

Entity Name: INTERNATIONAL OUTREACH MINISTRIES, INC.

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1400 SOUTH 19TH AVENUE #6 1400 SOUTH 19TH AVENUE HOLLYWOOD, FL 33020 #6 HOLLYWOOD, FL 33020 **Current Mailing Address: New Mailing Address:** 1400 SOUTH 19TH AVENUE #6 1400 SOUTH 19TH AVENUE HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 FEI Number: 82-0582743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: COLTEA, IONEAL COLTEA, IONEL 1400 SOUTH 19TH AVENUE #6 1400 SOUTH 19TH AVENUE HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 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: IONEL COLTEA 04/26/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete COLTEA, IONEL Name: Name: Address: 1400 SOUTH 19TH AVENUE #6 Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: COLTEA, FLORIN Name: COLTEA, FLORIN Address: 1400 SOUTH 19TH AVENUE Address: 3600 MONROE STREET APT 8 City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33021 Title: () Delete Title: () Change () Addition JUROVSCHI, ILIE Name: Name: 180 NE 12TH AVE APT 16C Address: Address:

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.

City-St-Zip:

SIGNATURE: IONEL COLTEA P 04/26/2004