


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # N03000003361**

1. Entity Name  
**BIBLE WAY FAR REACHING WORLD WIDE MINISTRIES, INC.**



Principal Place of Business <b>5789 NW 7TH AVENUE          MIAMI, FL 33127</b>	Mailing Address <b>5789 NW 7TH AVENUE          MIAMI, FL 33127</b>
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**DO NOT WRITE IN THIS SPACE**



04232007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>16-1698382</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**HAWKINS, JUANITA  
 7730 NW 12TH AVENUE  
 MIAMI, FL 33150**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
 Due by May 1, 2007**

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

U00000751034  
 05/18/07-80088-003 122.50

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, BERRY M 891 NW 213 TERRACE APT. 102 MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWKINS, JUANITA 7730 NW 12TH AVENUE MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS PACHECO, MINNIE 7730 NW 108 TERRACE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ADAMS, DARRIS 1130 NW 108 TERRACE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Juanita Hawkins*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/23/07* *305 751-3566*  
 Date Daytime Phone #