2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003598

FILED Apr 27, 2006 Secretary of State

Entity Name: INTERTERNATIONAL FIRST BORN CH. OF THE LIVING GOD INC. #2

Current Principal Place of Business:				New Principal Place of Business:			
1267 N.W 119 STREET				1267 N.W 119 STREET			
#1 MIAMI, FL	33169			#1 MIAMI, FL	33168		
Current Mailing Address:				New Mailing Address:			
19300 N.W 7TH COURT				19300 N.W 7TH COURT			
	MAMI, FL 33168 US			MIAMI, FL 33169 US			
FEI Number:	47-0950841	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
WILLIAMS, GLORIA F 19300 N.W 7TH COURT MIAMI, FL 33168 US				WILLIAMS, GLORIA F 19300 N.W 7TH COURT MIAMI, FL 33169 US			
The above in the State		ubmits this statement for the pu	ırpose o	f changing it	ts registered o	office or registered agent, or	both,
SIGNATUR	RE:					04/27/2006	
	Electroni	c Signature of Registered Ager	nt			Date	
OFFICERS	S AND DIRECT	ORS:		ADDITION	S/CHANGES	TO OFFICERS AND DIRE	CTORS:
Title: Name: Address: City-St-Zip:	P () WILLIAMS, GLC 19300 N.W 7TH MIAMI, FL 3316	COURT		Title: Name: Address: City-St-Zip:	P (X WILLIAMS, GL 19300 N.W 7T MIAMI, FL 331	H COURT	
Title: Name: Address: City-St-Zip:	VP () WILLIAMS, CLIN 19300 N.W 7TH MIAMI, FL 3316	COURT		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COPELAND, SY 1267 119 STRE MIAMI, FL 3316	ET		Title: Name: Address: City-St-Zip:	D (X COPELAND, S 490 NE 2ND A' MIAMI, FL 331	VE APT 1409	
Title: Name: Address: City-St-Zip:	D () WILLIAMS, ANG 4241 WAVERLY WEST PALM BE	DRIVE		Title: Name: Address: City-St-Zip:	WILLIAMS, AN 4241 WAVERL		
Title: Name: Address: City-St-Zip:	S () AIKEN, SHEREE 19300 N.W 7TH MAMI, FL 3316	COURT		Title: Name: Address: City-St-Zip:	S (X AIKEN, SHERE 19300 N.W 7T MAMI, FL 331	H COURT	
Title: Name: Address: City-St-Zip:	D () FRANCIS, ELFR 9010 N.E 5TH A' MIAMI, FL 3313	VE		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: GLORIA F WILLIAMS P 04/27/2006