

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003730

FILED
May 02, 2006
Secretary of State

Entity Name: GOSPEL FOR ALL MINISTRY, INC.

Current Principal Place of Business:

280 NE 172 STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

7724 BELVOIR DR.
ORLANDO, FL 32835

Current Mailing Address:

280 NE 172 STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

7724 BELVOIR DR
ORLANDO, FL 32835

FEI Number: 02-0690917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BENOIT, JEAN-CLAUDE
280 NE 172 STREET
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

BENOIT, JEAN-CLAUDE
7724 BELVOIR DR.
ORLANDO, FL 32835 US

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: _____

05/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENOIT, JEAN-CLAUDE
Address: 280 NE 172 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: ASD () Delete
Name: FRANCIOS, PETER
Address: 555 NW 129 ST
City-St-Zip: NORTH MIAMI, FL 33168

Title: VD () Delete
Name: NOREY, HENRI
Address: 2950 NW 45 LANE
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VD () Delete
Name: PETIT, KECHENER
Address: 300 NE 78TH ST. #17
City-St-Zip: MIAMI, FL 33138

Title: TD () Delete
Name: JEAN, GUETTY
Address: 510 NW 147TH ST.
City-St-Zip: MIAMI, FL 33168

Title: ATD () Delete
Name: ALLONCE, ROUSSELIN
Address: 2021 NW 68TH TERR.
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BENOIT, JEAN-CLAUDE
Address: 7724 BELVOIR DR.
City-St-Zip: ORLANDO, FL 32835

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JEAN-CLAUDE BENOIT

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date