

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006173

FILED  
Apr 12, 2006  
Secretary of State

**Entity Name:** SPIRIT OF TRUTH REDEMPTION INC.

**Current Principal Place of Business:**

2350 NW 54TH STREET  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

2350 NW 54TH STREET  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 65-1026361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NELSON, JULIUS  
2350 NW 54TH STREET  
MIAMI, FL 33142 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: DP ( ) Delete  
Name: NELSON, JULIUS  
Address: 2350 NW 54TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: DV ( ) Delete  
Name: JONES, DANIEL  
Address: 2350 NW 54TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: DST ( ) Delete  
Name: JONES, ADRAINE D  
Address: 2350 NW 54TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: MGRD ( ) Delete  
Name: HEATH, CHRISTINE  
Address: 2350 NW 54 STREET  
City-St-Zip: MIAMI, FL 33142

**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:

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:** JULIUS NELSON

DP

04/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date