2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007229

Entity Name: ABUNDANT HARVEST & WORSHIP MINISTRIES, INC.

FILED Jun 10, 2004 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

350 N. SEABOARD ROAD MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

350 N. SEABOARD ROAD MIAMI, FL 33169

FEI Number: 30-0199697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAVAN, DANIEL MILLER, LESLIE

645 IVES DIARY RD #404 350 N. SEABOARD ROAD

MIAMI, FL 33169 MIAMI, FL 33179

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: LESLIE MILLER 06/10/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

LAVAN, DANIEL MILLER, LESLIE Name: Name: Address: 645 IVES DIARY RD #404

8126 NW 162ND STREET Address: City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI, FL 33169

Title: () Delete Title: (X) Change () Addition LAVAN, CAROLYN Name: Name: GUMBS, CLEETON

Address: 8126 NW 162ND STREET Address: 4031 NW 201 STREET City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI, FL 33055

Title: () Delete Title: (X) Change () Addition

LAFLEUR, JOSEPH MILLER, LESLIE Name: Name: 645 IVES DAIRY RD. #404 455 NW 210 STREET # 104 Address: Address:

City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33169

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.

SIGNATURE: LESLIE MILLER Ρ 06/10/2004