2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008653

FILED Apr 27, 2007 Secretary of State

Entity Nam	ie: POWEI	R OF DELIVERANCE APOSTOLIC MINIS	STRIES, INC.	-
Current Principal Place of Business:			New Principal Place	of Business:
2849 NW 53RD TERR SUNRISE, FL 33313				
Current Mailing Address:			New Mailing Address:	
C/O EVANO 2849 NW 53 SUNRISE, F	BRD TERR	GENE Y. JOHNSON		
FEI Number: 2	20-0397720	FEI Number Applied For () FEI Nu	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
JOHNSON, IMOGENE Y 2849 NW 53RD TERR SUNRISE, FL 33313 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:				
	Electr	onic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	JOHNSON, E	TH AVE APT #D404	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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: IMOGENE JOHNSON P 04/27/2007