

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008792

FILED  
Jan 13, 2007  
Secretary of State

**Entity Name:** CHRIST RESTORATION MINISTRIES INC.

**Current Principal Place of Business:**

4521 NORTH WEST 6TH COURT  
PLANTATION, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 121601  
FT. LAUDERDALE, FL 33312

**New Mailing Address:**

**FEI Number:** 20-0303995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLLIVIERRE, DANIEL REV.  
4521 NORTH WEST 6TH COURT  
PLANTATION, FL 33311 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: D ( ) Delete  
Name: OLLIVIERRE, DANIEL REV.  
Address: 4521 NORTH WEST 6TH COURT  
City-St-Zip: PLANTATION, FL 33311

Title: D ( ) Delete  
Name: PERRY, MARRY  
Address: 1130 N.W. 15 PLACE  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: MCGREGOR, SUZANNE  
Address: 4271 N.W. 5TH STREET APT. 33  
City-St-Zip: PLANTATION, FL 33317

**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:

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: DANIEL OLLIVIERRE

REV

01/13/2007

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

\_\_\_\_\_  
Date