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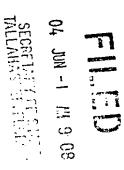
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TRANSMITTAL LETTER

FO: Amendment Section Division of Corporations MINIC TAIRS		
SUBJECT: CHAISTIAN ROMANN Church Inc., (Name of corporation)		
DOCUMENT NUMBER: NO 3000009380		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
(Name of person)		
CHRISTIAN ROMANN Church MINISTRIEC INC.		
121 South 24 Th Ave		
Holly (NOO), Fl. 33020 (City/state and zip code)		
For further information concerning this matter, please call: Cell 958 545:8186		
(Name of person) at (974) 485 4805 (Area code & daytime telephone number)		

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508,	or 617.1508, Florida Statutes, this statement of
change is submitted for a corporation organized under the laws of the	State of Florida in order
to change its registered office or registered agent, or both, in the State	of Florida.
$Q_{1} - Q_{2}$	0/ / 1/ 5: /
1. The name of the corporation: CHR 16 TIGN Roungs	y Church MINISTRIOS, INC
2. The principal office address: / 2/ South 23	1 The Ave
HOLN WOOD FT, 330	2 ₽
3. The mailing address (if different):	
V. 110 Hamily wellow (it will below).	······································
(0.00.00	V/0.3000 000
4. Date of incorporation/qualification: \(\subseteq \frac{1}{2} \subseteq \subseteq \frac{2}{2} \subs	ent number: NOSO0000 7380
5. The name and street address of the current registered agent and regi	stered office on file with the
Florida Department of State:	
Masha It &C	ntes
2. 2 - 2	
-50d5 01:W1 //	<u> </u>
For Kurbank 6	723/9
11 1911808 8478	200 9
6. The name and street address of the new registered agent (if changed	and /or registered office
(if changed):	
Day Tour	593
2511 N.W. 530	
(P,O, Box or personal mailton NOT acc	public)
TAMARAC ST. 23	RA9 57 8
,	
The street address of its registered office and the street address of the changed will be identical.	ne business office of its registered agent, as
_	
Such change was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing of the cha	nge.
O Patricia January	O PATRICIA TEXNIC
(Signature of an officer of director)	(Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to a further agree to comply with the provisions of all statutes relative duties, and I am familiar with and accept the obligation of my posibeing filed merely to reflect a change in the registered office addresseen notified in writing of this change.	ct in this capacity,
I further agree to comply with the provisions of all statutes relative duties, and I am familiar with and accept the obligation of my posi-	to the proper and complete performance of my tion as registered agent. Or, if this document is
being filed merely to reflect a change in the registered office address	ss, I hereby confirm thei the corporation has
The state of the s	
Han Lerinin 5-25-04	5-28-04
(Signature of Registered Agent)	(Dato)
If signing on behalf of an entity:	
-	
(Typed or Printed Name)	(Capacity)
/-/has at a comment	Note that the second of the se

*** FILING FEE: \$35.00 * * *