

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009529

FILED
Oct 01, 2004
Secretary of State**Entity Name:** SPEAK MINISTRIES & OUTREACH INC.**Current Principal Place of Business:**20520 N.W. 15TH AVENUE, APT. #224
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**20520 N.W. 15TH AVENUE, APT. #224
MIAMI, FL 33169**New Mailing Address:****FEI Number:** 03-0548121**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRANT, MARIE G
20520 N.W. 15TH AVENUE, APT. #224
MIAMI, FL 33169**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: P () Delete
Name: GRANT, MARIE G
Address: 20520 N.W. 15TH AVENUE, APT. #224
City-St-Zip: MIAMI, FL 33169

Title: P () Delete
Name: GRANT, DELORIS
Address: 14250 N.W. 3RD AVENUE
City-St-Zip: MIAMI, FL 33169

Title: P () Delete
Name: BROWN, JANICE
Address: 9380 N.W. 14TH AVENUE
City-St-Zip: MIAMI, FL 33147

Title: T () Delete
Name: GRIMES, JOSEPH
Address: 2765 N.W. 60 STREET
City-St-Zip: MIAMI, FL 33142

Title: C () Delete
Name: GRANT, LENORIS
Address: 20520 N.W. 15TH AVE. APT. #224
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: GRANT, EBONI
Address: 20520 N.W. 15TH AVE. APT. #224
City-St-Zip: MIAMI, FL 33169

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:

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 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: MARIE G. GRANT

P

10/01/2004

Electronic Signature of Signing Officer or Director

Date