2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000341

Apr 17, 2007 Secretary of State

Entity Name: WOMEN ON A MISSION OUTREACH MINISTRIES INC. **Current Principal Place of Business: New Principal Place of Business:** 5547 N STATE ROAD 7 5557 N STATE ROAD 7 FT LAUDERDALE, FL 33319 FT LAUDERDALE, FL 33319 **Current Mailing Address: New Mailing Address:** P O BOX 938744 MARGATE, FL 33093 FEI Number: 71-0958895 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: BISHOP, GILLIAN PASTOR 11113 NW 38 PL SUNRISE, FL 33351 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BISHOP, GILLIAN PASTOR Name: Name: 11113 NW 38 PL Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: BROWN, ABIGAIL Name: Address: 2331 N STATE ROAD 7. SUITE #208 Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCLEOD, ELIKA MCLEOD, ELIKA Name: Name: Address: 4684 SW 33 DR Address: 5927 PIERCE City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: HOLLYWOOD, FL 33021 Title: () Delete Title: (X) Change () Addition Name: BISHOP, EVERETT PASTOR Name: BISHOP, EVERETT PASTOR 11113 NW 38TH PLACE Address: 8007 SW 6TH COURT Address: City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: SUNRISE, FL 33351

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: ELIKA MCLEOD D 04/17/2007