2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000344

Entity Names ADONALCHODAL MINISTEL

FILED Apr 20, 2007 Secretary of State

Entity Name: ADONAI GLOBAL MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1299 NW 111 STREET MIAMI, FL 33167 **Current Mailing Address: New Mailing Address:** 1299 NW 111 STREET MIAMI, FL 33167 FEI Number: 02-0714231 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: VALCIN, MARIOT REV. DR 13117 SW 28TH STREET MIRAMAR, FL 33027 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: (X) Change () Addition () Delete VALCIN, MARIOT REV. DR VALCIN, MARIOT REV. DR Name: Name: 13117 SW 28TH ST. Address: 13117 SW 28TH ST. Address: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TANIS, JOSEPH S Name: Address: 1551 NW 132ND TER Address: City-St-Zip: MIAMI, FL 33167 City-St-Zip: Title: () Delete Title: (X) Change () Addition JEAN, FRANCIQUE Name: JEAN, FRANCIQUE Name: 400 NE 137TH ST. #208 Address: Address: 1195 NW 129 ST City-St-Zip: MIAMI, FL 33161 City-St-Zip: MIAMI, FL 33167 () Delete Title: Title: (X) Change () Addition LAFONTANT, YOLETTE Name: Name: LAFONTANT, YOLETTE 330 NE 164TH TERR 235 NE 118 ST Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: MIAMI, FL 33161 Title: () Delete Title: () Change (X) Addition EUGENE, LUCIENNE Name: Name: 150 NE 174 ST Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33162

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: REV. DR. MARIOT VALCIN P 04/20/2007