

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001155

FILED
Apr 26, 2006
Secretary of State

Entity Name: SALEM CHURCH OF GOD INTERNATIONAL, INC.

Current Principal Place of Business:

8397 NE 2ND AVE
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

1078 NW 102ND ST
MIAMI, FL 33150

New Mailing Address:

FEI Number: 34-1990739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEVERE, QUERLY
1051 NE 169 ST
N MIAMI BEACH, FL 33025 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: PED () Delete
Name: SEVERE, QUERLY
Address: 1051 NE 169TH ST
City-St-Zip: N MIAMI BEACH, FL 33162

Title: S () Delete
Name: CLAUDE, MARIE A
Address: 1100 NE 151 TERRACE
City-St-Zip: N MIAMI, FL 33162

Title: T () Delete
Name: ALTIMEAUX, ERIDA
Address: 1078 NW 102ND ST
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: THOMAS, DANIEL
Address: 1119 NW 114TH ST
City-St-Zip: MIAMI, FL 33168

Title: VP () Delete
Name: VOLTAIRE, LOUISON
Address: 320 NW 129TH ST
City-St-Zip: N MIAMI, FL 33168

Title: M () Delete
Name: SEVERE, ALTIAGA
Address: 1051 NE 169TH STREET
City-St-Zip: MIAMI, FL 33162

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
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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: QUERLY SEVERE

PED

04/26/2006

Electronic Signature of Signing Officer or Director

Date