

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001269

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** ALL NATIONS FOR CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

14510 NW 7TH AVENUE  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

1065 NW 150TH STREET  
MIAMI, FL 33168

**New Mailing Address:**

**FEI Number:** 32-1990121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOEL, BELIZARIO  
1065 NW 150TH STREET  
MIAMI, FL 33168 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: P ( ) Delete  
Name: NOEL, BELIZARIO  
Address: 1065 NW 150 STREET  
City-St-Zip: MIAMI, FL 33168

Title: D ( ) Delete  
Name: VELEZ, CAROLYN ANN  
Address: 17907 NW 78TH PLACE  
City-St-Zip: HIALEAH, FL 33183

Title: D ( ) Delete  
Name: BATAILLE, JULIO LOUIS  
Address: 735 NE 88TH STREET  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: LACORNE, JACQUELINE  
Address: 2810 SW 84TH TERRACE #10  
City-St-Zip: MIAMI, FL 33025

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D ( ) Change (X) Addition  
Name: NOEL, VENITA  
Address: 15020 NW 2ND AVENUE  
City-St-Zip: MIAMI, FL 33168 US

I hereby certify that the information supplied with this filing does not qualify 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: BELIZARIO NOEL

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date