2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# N04000002359

Entity Name: CONFIRMING WORD INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

820 NW 104 STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

820 NW 104 STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 20-0841129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBINSON, ARVID G
820 NW 104 STREET
MIAMI, FL 33150 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: ROBINSON, ARVID G
Address: 301 NW 52ND STREET
City-St-Zip: MIAMI, FL 33127

Title: V ( ) Delete
Name: ROBINSON, DONNA
Address: 301 NW 52ND STREET
City-St-Zip: MIAMI, FL 33127

Title: D ( ) Delete
Name: CUMMINGS, MICHAEL R
Address: 1925 NW 84 STREET
City-St-Zip: MIAMI, FL 33147

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: S ( ) Change (X) Addition
Name: CUMMINGS, KERMA D
Address: 1925 NW 84 STREET
City-St-Zip: MIAMI, FL 33147

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: ARVID ROBINSON P 04/28/2007

Electronic Signature of Signing Officer or Director — Date