

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004942

FILED
Feb 04, 2005
Secretary of State

Entity Name: MIAMI FAMILY MISSION INC

Current Principal Place of Business:

10838 89 ST
MIAMI, FL 33176

New Principal Place of Business:

8260 SW 102 ST
MIAMI, FL 33156

Current Mailing Address:

10838 89 ST
MIAMI, FL 33176

New Mailing Address:

8260 SW 102 ST
MIAMI, FL 33156

FEI Number: 20-1167994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOERTER, ROBERT
10838 89 ST
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

WOERTER, ROBERT
8260 SW 102 ST
MIAMI, FL 33156 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:

02/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOERTER, ROBERT
Address: 10838 89 ST
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: OLINGER, HENRY
Address: 10838 89 ST
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: MILLER, ROBIN
Address: 10838 89 ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOERTER, ROBERT
Address: 8260 SW 102 ST
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change () Addition
Name: OLINGER, HENRY
Address: 8260 SW 102 ST
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change () Addition
Name: MILLER, ROBIN
Address: 8260 SW 102 ST
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT WOERTER

D

02/04/2005

Electronic Signature of Signing Officer or Director

Date