

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007069

FILED
Mar 09, 2006
Secretary of State

Entity Name: THE WORSHIP TABERNACLE, INC.

Current Principal Place of Business:

12350 SW 132ND CT
SUITE # 106
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12350 SW 132ND CT
SUITE # 106
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-1386228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIN, IDANIA
12350 SW 132ND CT
SUITE # 106
MIAMI, FL 33186 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: D () Delete
Name: MACHIN, DORIS
Address: 9609 SW 138 AVE.
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: BRITO, TANIA
Address: 15364 SW 32 TERR.
City-St-Zip: MIAMI, FL 33185

Title: D () Delete
Name: MARIN, IDANIA
Address: 12254 SW 148 TERR.
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: CARRASQUILLO, MADELINE
Address: 5201 NW 7 ST. #317
City-St-Zip: MIAMI, FL 33126

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:

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: DORIS MACHN

PD

03/09/2006

Electronic Signature of Signing Officer or Director

Date