2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007878

Entity Name: OPERATION RESCUE MISSION INC

Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5449 SOUTH SEMORAN BOULEVARD 6923 NARCOOSSEE ROAD

SUITE 18-A SUITE 628

ORLANDO, FL 32822 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

6913 LONG NEEDLE CT ORLANDO, FL 32822 US

FEI Number: 20-1526361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BERMÚDEZ, SANDRA I BERMÚDEZ, SANDRA I 6913 LONG NEEDLE CT 5449 SOUTH SEMORAN BOULEVARD ORLANDO, FL 32822

SUITE 18-A

ORLANDO, FL 32822 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: 04/17/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BERMÚDEZ, SANDRA I BERMÚDEZ, SANDRA I Name: Name: 5449 SOUTH SEMORAN BOULEVARD, SUITE 18-A Address: 6913 LONG NEEDLE CT Address:

City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: ORLANDO, FL 32822 US

() Delete Title: Title: (X) Change () Addition

BERMÚDEZ, JORGE L BERMÚDEZ, JORGE L Name: Name:

Address: 5449 SOUTH SEMORAN BOULEVARD, SUITE 18-A Address: 6923 NARCOSSEE ROAD SUITE 628

City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: ORLANDO, FL 32822 US

Title: SEC () Delete Title: SEC (X) Change () Addition DAMARIS, SOTO Name: VIDAL, ORTIZ Name:

P.O. BOX 621743 6923 NARCOSSEE ROAD SUITE 628 Address: Address:

City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: ORLANDO, FL 32822 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: SANDRA I BERMUDEZ Ρ 04/17/2008