2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008503

Entity Name: NAZIRITE CHILDRENS MISSIONS INC.

FILED Jun 08, 2008 Secretary of State

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

1330 SW 78 CT 6855 SW 81ST STREET 260

MIAMI, FL 33144

MIAMI, FL 33143

Current Mailing Address: New Mailing Address:

P.O. BOX 162509 1330 SW 78 CT MIAMI, FL 33144 MIAMI, FL 33116

FEI Number: 56-2481100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ESCALONA, JORGE FABIO, HERBERT 1330 SW 78 CT 6855 SW 81ST STREET MIAMI, FL 33144 US 260 MIAMI, FL 33143 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: HERBERT FABIO 06/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ESCALONA, JORGE BEJARANO, NATALIE Name: Name:

Address: 1330 SW 78 CT Address: 9683 SW 138TH AVENUE

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33186

(X) Change () Addition Title: TD () Delete Title: Name: GARCES, MARTHA Name: FABIO, HERBERT

Address: 3970 SW 68 AVE Address: **6855 SW 81ST STREET** City-St-Zip: MIAMI, FL 33155 City-St-Zip: MIAMI, FL 33143

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

VARGAS, GISELA Name: Name: 6429 SYNPHONY LN Address: Address: City-St-Zip: DALLAS, TX 75227 City-St-Zip:

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: HERBERT FABIO TD 06/08/2008