2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010290

FILED Jan 23, 2008 Secretary of State

Entity Name: JUST AS I AM INTERNATIONAL MINISTRIES, INC.

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

2170 RUTLAND STREET 14213 N.W. 18TH PLACE

OPA LOCKA, FL 33054 US PEMBROKE PINES, FL 33028 US

Current Mailing Address: New Mailing Address:

P.O. BOX 681668 P.O. BOX 680143

MIAMI, FL 33143 US MIAMI, FL 33168 US

FEI Number: 20-2867146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOODIN, LYDIA GOODIN, LYDIA

2170 RUTLAND STREET 14213 N.W. 18TH PLACE

OPA LOCKA, FL 33054 US PEMBROKE PINES, FL 33028 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: 01/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: GOODIN, LYDIA Name: GOODIN, LYDIA

Address: 2170 RUTLAND STREET Address: 14213 N.W. 18TH PLACE

City-St-Zip: OPA LOCKA, FL 33054 US City-St-Zip: PEMBROKE PINES, FL 33028 US

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

 Name:
 VANHORN, RON
 Name:

 Address:
 1000 HARRISON STREET
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33019 US
 City-St-Zip:

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

 Name:
 NEWKIRK, RÖBERT
 Name:

 Address:
 5601 NW 18TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33142 US
 City-St-Zip:

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

Name: SARACINO, TONI Name: SARACINO, TONI

Address: 2170 RUTLAND STREET Address: 2350 N.W. 54TH STREET #1104

City-St-Zip: OPA LOCKA, FL 33054 US City-St-Zip: MIAMI, FL 33047 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: LYDIA GOODIN P 01/23/2008