2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2009
Secretary of State

DOCUMENT# N05000001326

Entity Name: NEW VISION WORSHIP CENTER, INC.

Current Principal Place of Business:

9900 NW 7 AVE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

19388 NW 29TH PL
MIAMI GARDENS, FL 33056

New Mailing Address:

FEI Number: 34-2034966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PIERRE, POLESTE REV.
19388 NW 29 PL
MIAMI, FL 33056 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: CAMILLE, ELVIS
Address: 9900 NW 7 AVE
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: PIERRE, POLESTE REV.
Address: 9900 NW 7 AVE
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: JEANNOT, ANNE R
Address: 9900 NW 7 AVE
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: PIERRE, MARIE
Address: 9900 NW 7 AVE
City-St-Zip: MIAMI, FL 33150

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 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: POLESTE PIERRE P 02/14/2009

Electronic Signature of Signing Officer or Director — Date