

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003424

FILED
Apr 14, 2007
Secretary of State

Entity Name: INNER MAN INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

7969 SW 7TH CT
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

PO BOX 190064
FT LAUDERDALE, FL 33319

New Mailing Address:

7969 SW 7TH CT
NORTH LAUDERDALE, FL 33068

FEI Number: 81-0666960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: DPT () Delete
Name: CLAXTON, WARREN A
Address: 7969 SW 7TH CT
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D () Delete
Name: BARNES-REAVES, TANYA
Address: 2822 NW 212TH ST
City-St-Zip: OPA LOCKA, FL 33056

Title: D () Delete
Name: PARKS-WOODARD, JANET
Address: 1795 NW 46 ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: ESCOFFERY, JUANITA
Address: 10024 ARMANI DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: REAVES, ANTHONY
Address: 2822 NW 212TH ST
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MOMPLAISIR, JANET
Address: 1795 NW 46 ST
City-St-Zip: MIAMI, FL 33142

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: WARREN A CLAXTON

DPT

04/14/2007

Electronic Signature of Signing Officer or Director

Date