

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004343

FILED  
Apr 21, 2007  
Secretary of State

**Entity Name:** THE ANGEL OF THE EPHEBUS MISSIONARY INTERNATIONAL, INC.

**Current Principal Place of Business:**

POB 8591  
FORT LAUDERDALE, FL 33310

**New Principal Place of Business:**

3130 NE 5 AVENUE  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

3290 NW 39TH STREET  
LAUDERDALE LAKES, FL 33309

**New Mailing Address:**

**FEI Number:** 84-1678901      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ERMILUS, CLAUDE  
3290 NW 39TH STREET  
LAUDERDALE LAKES, FL 33309      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: ERMILUS, CLAUDE  
Address: 3061 NE 11TH AVE  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D      ( ) Delete  
Name: VIL, MARIE M  
Address: 850 NW 36 CT  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D      ( ) Delete  
Name: DURAME, YBAIN  
Address: 3400 NW 50 AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: D      ( ) Delete  
Name: ERMILUS-VERTIL, GUERDA  
Address: 3130 NE 5TH AVE  
City-St-Zip: POMPANO BEACH, FL 33064

**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 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: CLAUDE ERMILUS

P

04/21/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date