2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# N05000005200

Entity Name: DOWEHTY INTERNATIONAL MINISTRIES INC

Current Principal Place of Business:

17421 SW 89 CT
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

17421 SW 89 CT
MIAMI, FL 33157

New Mailing Address:

FEI Number: 20-2913940 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, JOSE CPA
12839 NW 18 CT
PEMBROKE PINES, FL 33028 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:	P	( ) Delete
Name:	CHANDY, JOSEPH	
Address:	17421 SW 89 CT,	
City-St-Zip:	MIAMI, FL 33157 US	
Title:	VP	( ) Delete
Name:	CHANDY, VALSAMMA	
Address:	17421 SW 89 CT	
City-St-Zip:	MIAMI, FL 33157 US	
Title:	D	( ) Delete
Name:	PRAKASH, JOSE	
Address:	5025 NW 104 WAY	
City-St-Zip:	CORAL SPRINGS, FL 33076 US	
Title:	D	( ) Delete
Name:	THOMAS, JOSE	
Address:	12839 NW 18 CT	
City-St-Zip:	PEMBROKE PINES, FL 33028 US	
Title:	D	( ) Delete
Name:	THARAYIL, STEPHEN J	
Address:	2120 NW 33 RD TERRACE	
City-St-Zip:	COCOUNUT CREEK, FL 330266 US	
Title:	D	( ) Delete
Name:	KUNJUVAREED, BIJU	
Address:	3690 SW 24 ST	
City-St-Zip:	MIAMI, FL 33133 US	

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KUNJUVAREED, BIJU	
Address:	1790 SW 29TH AVE	
City-St-Zip:	MIAMI, FL 33133 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: JOSEPH CHANDY P 03/26/2009

Electronic Signature of Signing Officer or Director — Date