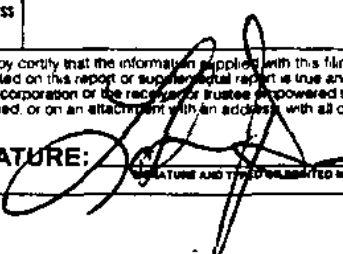


Mar 22, 2007
Secret

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N05000008106		
1. Entity Name HOUSE OF PRAYER OF MIAMI INC		
Principal Place of Business 15320 SW 106TH AVENUE MIAMI, FL 33157	Mailing Address 15320 SW 106TH AVENUE MIAMI, FL 33157	
DO NOT WRITE IN THIS SPACE		03202007 No Chg-NP CR2E037 (4/06)
		4. FEI Number 20-3273359
		Applied For ☐ Not Applicable ☐
		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ABERCROMBIE ACCOUNTING INC 18115 SW 117TH AVENUE #25 MIAMI, FL 33177		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with and accept the obligations of registered agent.		
SIGNATURE _____ Signature Applied or printed name of registered agent and fee is applicable. (NOTE: Registered Agent Signature required when necessary) DATE _____		
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	OPST PICKFORD, BRUCE K 15320 SW 106TH AVENUE MIAMI, FL 33157	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D PICKFORD, LATONIA B 15320 SW 106TH AVENUE MIAMI, FL 33157	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D TIMMONS, WINDY 15320 SW 106TH AVENUE MIAMI, FL 33157	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath that I am an officer or director of the corporation or the recipient or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other lines empowered		
SIGNATURE:  (LATONIA PICKFORD) 3-19-07 3055535299		

CHECK #153