

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009515

FILED  
May 06, 2008  
Secretary of State

Entity Name: OM ONE GOD FOUNDATION, INC.

## Current Principal Place of Business:

9431 LIVE OAK PL APT 102  
102  
DAVIE, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

9431 LIVE OAK PL APT 102  
102  
DAVIE, FL 33324

## New Mailing Address:

FEI Number: 13-4308535      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

VALENCIA, LUZ A PRESIDE  
9401 LIVE OAK PL # 104  
104  
DAVIE, FL 33324 US

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: S ( ) Delete  
Name: RANGEL, CLAUDIA L  
Address: 2051 TIGRIS DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete  
Name: MAZUERA, DIANA  
Address: 9431 LIVE OAK PLACE # 102  
City-St-Zip: DAVIE, FL 33324

Title: V ( ) Delete  
Name: ESLAVA, CESAR J  
Address: 9401 LIVE OAK PL # 104  
City-St-Zip: DAVIE, FL 33324

Title: D ( ) Delete  
Name: MEJIA, SYLVIA  
Address: 9470 LIVE OAK PL  
City-St-Zip: DAVIE, FL 33324

## 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: LUZ A VALENCIA

PDST

05/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date