

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012322

FILED  
Jan 19, 2007  
Secretary of State

**Entity Name:** ASSEMBLEIA DE DEUS MINISTERIO CHAVE DE DAVI, CORP.

**Current Principal Place of Business:**

3160 MERRICK TERRACE  
MARGATE, FL 330638242

**New Principal Place of Business:**

3919 PASSION FLOWER RD  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

3160 MERRICK TERRACE  
MARGATE, FL 330638242

**New Mailing Address:**

3919 PASSION FLOWER RD  
COCONUT CREEK, FL 33073

**FEI Number:** 20-3909924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATOS, AMADEU L  
3160 MERRICK TERRACE  
MARGATE, FL 330638242 US

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

MATOS, AMADEU L  
3919 PASSION FLOWER RD  
COCONUT CREEK, FL 33073 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: AMADEU L MATOS

01/19/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MATOS, AMADEU L  
Address: 3160 MERRICK TERRACE  
City-St-Zip: MARGATE, FL 330638242

Title: DV ( ) Delete  
Name: DE MACEDO, CONRADO P  
Address: 854 CRYSTAL LAKE DR  
City-St-Zip: POMPANO BEACH, FL 33065

Title: DST ( ) Delete  
Name: DE MATOS, CIBELE B  
Address: 854 CRYSTAL LAKE DR  
City-St-Zip: POMPANO BEACH, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: MATOS, AMADEU L  
Address: 3919 PASSION FLOWER RD  
City-St-Zip: COCONUT CREEK, FL 33073

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: AMADEU L MATOS

DP

01/19/2007

Electronic Signature of Signing Officer or Director

Date