2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# N06000001703

Entity Name: INTERNATIONAL CHRISTIAN COALITION, INC.

Current Principal Place of Business:

28945 SW 187TH AVENUE
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

28945 SW 187TH AVENUE
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 20-4310023 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUIZ, ANDRES I
18250 SW 288TH STREET
HOMESTEAD, FL 33030 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:	FATTORE, MARCELO	
Address:	17145 NORTH BAY ROAD, APT 4407	
City-St-Zip:	SUNNY ISLES, FL 33160	
Title:	VP,T	( ) Delete
Name:	RUIZ, ANDRES I	
Address:	18250 SW 288TH STREET	
City-St-Zip:	HOMESTEAD, FL 33030	
Title:	D	( ) Delete
Name:	RODRIGUEZ, MARLENE	
Address:	4950 PINE TREE DRIVE	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	S	( ) Delete
Name:	CAMACHO, HUGO	
Address:	28945 SW 187TH AVENUE	
City-St-Zip:	HOMESTEAD, FL 33030	
Title:	D	( ) Delete
Name:	FATTORE, LILIANA	
Address:	17145 NORTH BAY ROAD, APT 4407	
City-St-Zip:	SUNNY ISLES, FL 33160	
Title:	D	( ) Delete
Name:	RUIZ, ALICIA	
Address:	18250 SW 288TH STREET	
City-St-Zip:	HOMESTEAD, FL 33030	

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:	( ) 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: ANDRES I RUIZ VP 01/04/2007

Electronic Signature of Signing Officer or Director — Date