2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002071

FILED Apr 09, 2007 Secretary of State

Entity Name: ROCK OF MIRACLES INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 2002 COLONIAL PARK DRIVE 3111 RECEDA CT STE 102 TAMPA, FL 33618 TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** 2002 COLONIAL PARK DRIVE 3111 RECEDA CT STE 102 STE 102 TAMPA, FL 33612 TAMPA, FL 33618 FEI Number: 20-4698427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOUFFRANT, MARIE SOUFFRANT, MARIE 2002 COLONÍAL PARK DRIVE 3111 RECEDA CT TAMPA, FL 33618 US STE 102 TAMPA, FL 33612 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: 04/09/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SOUFFRANT, MARIE SOUFFRANT, MARIE Name: Name: Address: 2002 COLONIAL PARK DRIVE, STE 102 Address: 3111 RECEDA CT City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33618 Title: () Delete Title: () Change () Addition Name: JOSEPH, MICHELET Name: Address: 14325 CHECHE PLACE Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: () Delete Title: () Change () Addition AUGUSTIN, MIRLENE Name: Name: Address: 13138 N 20TH, #20 Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: ATHIS, WOODLEY 3111 RECEDA CT Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33618

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: MARIE SOUFFRANT Ρ 04/09/2007