

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003043

FILED
Jul 30, 2008
Secretary of State

Entity Name: HEART OF GOD MINISTRIES-MIAMI, INC

Current Principal Place of Business:

8759 SW 215TH TERR
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

PO BOX 570663
MIAMI, FL 33257

New Mailing Address:

FEI Number: 20-3355644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

CALDWELL, STEVEN
8759 SW 215TH TERR
MIAMI, FL 33189 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: D () Delete
Name: CALDWELL, STEVEN
Address: 8759 SW 215TH TERR
City-St-Zip: MIAMI, FL 33189

Title: D () Delete
Name: SHINHOSTER, MACHA
Address: 13247 SW 257TH TERR
City-St-Zip: MIAMI, FL 33032

Title: DT () Delete
Name: MILLER, TERRI
Address: 21831 SW 111TH AVE
City-St-Zip: MIAMI, FL 33170

Title: D () Delete
Name: KELLY, OMAR
Address: 15521 SW 104TH AVE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: MILLER, TRACI
Address: 21831 SW 111TH AVE
City-St-Zip: MIAMI, FL 33170

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: STEVEN CALDWELL

D

07/30/2008

Electronic Signature of Signing Officer or Director

Date