

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004494

FILED
Apr 17, 2008
Secretary of State

Entity Name: UNITED HOUSE OF FAITH, INC.

Current Principal Place of Business:

1285 NW 172ND TERRACE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

1285 NW 172 TERRACE
MIAMI, FL 33169

New Mailing Address:

1285 NW 172ND TERRACE
MIAMI, FL 33169

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCIS, NEVILLE
1285 NW 172 TERRACE
MIAMI, FL 33169 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: FRANCIS, NEVILLE
Address: 1285 NW 172 TERRACE
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: FRANCIS, CASTERIA
Address: 1285 NW 172 TERRACE
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: BRYAN, MAUREEN
Address: 1435 NW 193 TERR
City-St-Zip: MIAMI, FL 33169

Title: T () Delete
Name: EXCELL, LINDELL
Address: 9761 GLACIER DRIVE
City-St-Zip: MIRAMAR, FL 33025

Title: AT () Delete
Name: FRANCIS, RHONE
Address: 1285 NW 172 TERRACE
City-St-Zip: MIAMI, FL 33169

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:

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: NEVILLE FRANCIS

MR

04/17/2008

Electronic Signature of Signing Officer or Director

Date