2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR) FILED Apr 28, 2008 08:00 AN Secretary of State DOCUMENT # N06000006980 1. Entity Name UP ON THE STREET MINISTRY, INC. Mailing Address Principal Place of Business 621 NW 15TH TERRACE 621 NW 15TH TERRACE FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 20-5204751 No: Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAGGINS, SANDRA G Street Address (P.O. Box Number is Not Acceptable) 621 NW 15TH TERRACE FT LAUDERDALE FL 33311 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or conted name of legistered agent and tale. Lampicable (NOTE: Registered Agent signability required when reinstaurig) DATE কৰিয়ালীৰ বাছিল্য নিৰ্ভাৱ একুল্য ক্ৰিয়াৰ ক্ৰিয়াৰ প্ৰত্যুক্ত FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May 8e Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delate Change Addition TITLE TITLE DAGGINS, SANDRA G NAME NAME /21/08-80104-019 61.25 621 NW 15TH TERRACE STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST ZIP CITY ST ZIP TITLE D Detate TITLE Change Addition DAGGINS, WILLIAM J NAME NAME 621 NW 15TH TERRACE STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-7IP CITY ST-ZIP Change Delete TITLE Addition TIME DAGGINS, WILLIE JOE NAME D/AME STREET ADDRESS 621 NW 15TH TERRACE STREFT ADDRESS FT LAUDERDALE FL 33311 CITY-ST-7IP CITY-ST-ZIP ncitibbA [7] THE ☐ Delete TITLE Change COLE, HOWARD NAME NAME STREET ADDRESS 616 W 14TH AVE #1 STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete TITLE Change Addition NAME NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

PITY-ST-7IP

SIGNATURE: Sanda Daggi

STHLET ADDRESS

CHY-ST-ZIP

4/25/08