2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009268

FILED Apr 29, 2009 Secretary of State

Entity Name: THIRST AND HUNGER MINISTRIES, INC.

| Current Principal Place of Business: | | New Principal Plac | New Principal Place of Business: | |
|--|--|---|---|---|
| 360 S.W. | 123 CT. | | | |
| 201 IIAMI, FL | 33186 | | | |
| urrent Ma | ailing Add | ress: | New Mailing Addre | ess: |
| 360 S.W. | 123 CT. | | | |
| 201 IAMI, FL | 33196 | | | |
| · | 20-5278646 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| | | , | , | |
| | | of Current Registered Agent: | Name and Address | of New Registered Agent: |
| AFAURIE, 360 S.W. | CAROLIN 123 CT | A | | |
| 201 | | | | |
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| AIVII, FL | 33100 03 | | | |
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| e above the State | named enti of Florida. | ity submits this statement for the | e purpose of changing its register | red office or registered agent, or both, |
| ne above the State | named enti of Florida. :E: | ity submits this statement for the | | red office or registered agent, or both, Date |
| ne above the State GNATUR | named enti of Florida. :E: | ronic Signature of Registered A | gent | |
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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: CAROLINA LAFAURIE MS. 04/29/2009