Control of Parker of Basiness Ministries, INC.     Secretary of State     Oscience of Society     Secretary of State     Oscience of Society     Secretary of State     Oscience of Society     Secretary     State     Oscience of Society     Secretary     State     Oscience     Secretary     Oscience     Secretary     Oscience     Secretary     Oscience     Secretary     State     Secretary     Secretary     State     Secretary	20	07 NOT-FOR-PRO ANNUAL	OFIT CORPOR	May	FILED May 22, 2007 8:00 am		
ASSD RORTH STATE RD 7 UNIT 6 105       ASSD RORTH STATE RD 7 UNIT 6 105         AUDERDALE LAKES, FL 33319       AUDERDALE LAKES, FL 33319         2. PIncloal Place of Busines - No PO. Box #       3. Maing Address         Solite, Apt # eff       Solite, Apt # Address         City & State       Solite, Apt # Address         City & State       Solite, Apt # Address         Ziv       Country         Solite, Apt # Address of Current Regulations Agent         JUNE, MINNEE D         ATO IN W 88TH WAY         CORA UNE BOARD STORE AGENT         Multice Dest address of Current Regulations Agent         JUNE, MINNEE D         JUNE, MINNEE D         ATO IN W 88TH WAY         CORA UNE         Street Address (P O Box Number is Not Accession)         CORA UNE         Build Street Address (P O Box Number is Not Accession)         CORA UNE         Build Street Address (P O Box Number is Not Accession)         CORA UNE         Build Street Address (P O Box Number is Not Accession)         Due Street Address (P O Box Number is Not Accession)         Due Street Address (P O Box Number is Not Accession)         Due Street Address (P O Box Number is Not Accession)         Due Street Address (P O Box Number is Not Accession)         Due Street Address (	1. Entity Name						
Suite         Apr. 4, etc.         Dist. NW 95 much         Dist. 2007         On-NP         CR2E037 (12/06)           City & State         Country         State         A Applied Ter           Zip         Country         State         Country         State         State         A Applied Ter         Nume and Address of Num Registered April         Nume and Address of Num Registered April         Nume           JUNE, MINNE D         A State         The address of Num Registered April         Nume         Street Address (P O. Bor Number is Not Accessite of Fonds. Tem Ismifier with, and accessite in endigative digate           JUNE, MINNE D         Arton Nur Set Nur Set Nur Set Nur Set Number is Not Accessite of Fonds. Tem Ismifier with, and accessite in endigators of neglistered agert.         Street Address (P O. Bor Number is Not Accessite of Fonds. Tem Ismifier with, and accessite in endigators of neglistered agert.         Street Address (P O. Bor Nur Ber Set of Fonds. Tem Ismifier with, and accessite in endigators of neglistered Agent         Dist. 2007           Street Address of neglistered Agent         Orint CERS AND Directores         Street Nur Set Nur S	4850 NORTH STATE RD 7 UNIT G 105 4850 NORTH STATE RD						
Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.     OS142007     Chg. NP     CP2E0037 (12/06)       Cay & State     Commy     Appleter For     Appleter For     Appleter For       Zap     Country     Country     Country     Suite: Apl. F. etc.     Appleter For       Zap     Country     Country     Country     Suite: Apl. F. etc.     Appleter For       Zap     Country     Country     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Appleter For       JUNE, MINNIE D     Appleter For     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.       JUNE, MINNIE D     Aprox     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.       JUNE, MINNIE D     Aprox     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.     Suite: Apl. F. etc.       CORAL SPRINGS, FL. 33076     Dector: Comparing: Financing:     Trust: Financing:     State     Florid: Department of State       Filling Fee is \$61:25     Durber Hall, Coro Comparing: Financing:     Trust: Financing:     State     Florid: Department of State       104.     Dector: Comparing: Financing:     Trust: Financing:     State     Florid: Department of State       105.     Filling Fee is \$61:25     Coro: Comparing: Financing:			1. In				
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Zip         Country         Zip         Country         S. Centrol of Shuta Deared         S. Centrol of Shuta Deared         S. To Addition           JUNE, MINNE D         5. Mame and Address of Current Registered Agent         7. Name and Address of New Registered Agent         7. Name and Address of New Registered Agent           JUNE, MINNE D         4.00 LNV Set Minne D         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           CORAL SPRINGS, FL. 33076         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           SIGMATURE         Street Address	City & State					4. FEL Number	
JUNE, MINNE D       4701 NW 98TH WAY         CORAL SPRINGS, FL 33076       Streat Address (P 0. Box Number is Not Acceptable)         Corp - Corp	Zip Country Z			Country 5. Certificate of Status Desired Status Section \$8.75 Add		atus Desired S8.75 Additional	
JUNE, MINNE D       Address (PO. Box Number is Not Acceptable)         CORAL SPRINGS, FL 33076       Street Address (PO. Box Number is Not Acceptable)         City       FL       Zp Code         It The above named entity submits the statement for the purpose of changing its registered agent.       Other State of Florida. Lam familiar with, and accept the obligations of registered agent.       Dote         SIGNATURE       Byows inpost of information dregistered agent.       Other in the State of Florida. Lam familiar with, and accept the obligations of registered agent.       Dote         SIGNATURE       Byows inpost of information dregistered agent.       Other information dregistered agent.       Dote         SIGNATURE       Detection Campaign Financing       \$5,00 May Be       Make check payable to Florida Department of State         Due by September 14, 2007       It and fund Contribution.       State fund Control       Address To OFFICERS AND DIRECTORS IN 10         Ittl:       D       OFFICERS AND DIRECTORS       It and fund the state of Rome and the state and the stat		6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered Agent	
CORAL SPRINGS, FL 33076  City  City  FL  Zip Code  City FL  Zip Cod							
Change Corrections of registered agent.     Consult states and the purpose of changing its registered agent. or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.     Signature, and accept agent.     Signature, and accept agent agent are added agent.     Signature, and accept agent a							
The above named entity submits the statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.     SIGNATURE     Signature, type is set and in the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept     SIGNATURE     Signature, type is set and in the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept     SIGNATURE     Signature, type is set and in the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept     The by September 14, 2007     Signature, type is set and in the state of the set aphoton.     Signature, type is set and the set appoint agent and the set aphoton.     Signature, type is set and the set appoint agent agent, and the set appoint agent agent, and the set appoint agent agent, and the set appoint agent agent.     Signature, type is set appoint agent agent, and the set appoint agent agent, and accept     Signature, type is appointed agent, and the set appoint agent agent, and accept the set appoint agent agent, agent, and accept the set appoint agent agent, agent, and accept the set appoint agent agent, and accept the set appoint agent, and agent, and accept the set appoint agent agent, a				City		Zin Code	
Bedigations of registered agent.  SIGNATURE      Bywherk typed or prifed care of ingeness agent and the 4 agehade.     (NOTE: Registered Agent segreture segretur	8. The above	named entity submits this statement for	r the numose of changing its rec		FL		
Filling Fee is \$61.25 Due by September 14, 2007       9. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees       Make check payable to Fiorida Department of State         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         ITILE       D       Direct Andreas       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         ITILE       D       Direct Andreas       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         ITILE       D       Direct Andreas       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         ITILE       D       Direct Andreas       TITLE       Direct Andreas       Addition         ITILE       D       Direct Andreas       Direct Andreas       Coracle Stress Andreas       Addition         ITILE       D       Direct Andreas       ITILE       Make       Change       Addition         ITILE       D       Direct Andreas       ITILE       Make       Change       Addition         ITILE       D       Direct Andreas       ITILE       Make       IChange       Addition         ITILE       D       Direct Andreas       ITILE       ITILE       ITILE       ITILE       ItiLe       ItiLe       ItiLe       ItiL	the obligat	ions of registered agent.					
Due by September 14, 2007         Trust Fund Contribution.         Added to Fees         Florida Department of State           10.         OFFICERS AND DIRECTORS         11.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10           ITTLE         JUNE, MINNIE D         ID belee         TITLE         MME         ID change         Addition           STREE ADDRESS         4701 MW 48TH WAY         ITTLE         MME         ID change         Addition           ITTLE         D         ID belee         TITLE         MME         ID change         Addition           ITTLE         D         ID belee         TITLE         MME         ID change         Addition           ITTLE         D         ID belee         TITLE         MME         ID change         Addition           ITTLE         D         ID belee         TITLE         ID Change         Addition         ID belee         ID					equirea when reinstating)		
ITLE       D       IDENT ST-2P       IDENT S						• •	
NME       JUNE, MINNIE D       Delete       MME       STREET ADDRESS       JUNE, MINNIE D       Delete       NME         STREET ADDRESS       CORAL SPRINGS, FL 33076       OITY-ST-ZP       CORAL SPRINGS, FL 33076       OITY-ST-ZP       CORAL SPRINGS, FL 33076       Delete       TILE         MME       JUNE, CURTIS E       Image       Delete       TILE       D       Change       Addition         MME       JUNE, CURTIS E       STRET ADDRESS       CORAL SPRINGS, FL 33076       CITY-ST-ZP       CORAL SPRINGS, FL 33076       CITY-ST-ZP         TITLE       D       CORAL SPRINGS, FL 33076       CITY-ST-ZP       CORAL SPRINGS, FL 33076       CITY-ST-ZP         TITLE       D       Delete       TITLE       MME       Change       Addition         NAME       STRET ADDRESS       GITY-ST-ZP       CORAL SPRINGS, FL 33312       CITY-ST-ZP       CITY-ST-ZP         TITLE       D       Change       Delete       TITLE       MME       Change       Addition         NMME       STRET ADDRESS       GITY-ST-ZP       SUNRISE LAKES BLVD. BLDG APT 203       STRET ADDRESS       CITY-ST-ZP       CITY-ST-ZP       CITY-ST-ZP       CITY-ST-ZP       Change       Addition         NMME       STRET ADDRESS       CITY-ST-ZP       Dele				· · · · · · · · · · · · · · · · · · ·			
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SIREIT ADDRESS       4701 NW 48TH WAY       SIREIT ADDRESS         CITY-SI-2P       CORAL SPRINGS, FL 33076       CITY-SI-2P         ITTLE       D       Delete       TTLE         NAME       WRIGHT, EMMA       SIREIT ADDRESS       CITY-SI-2P         CITY-SI-2P       FT LAUDERDALE, FL 33312       CITY-SI-2P         TITLE       D       Delete       TITLE         NAME       SIREIT ADDRESS       CITY-SI-2P         TITLE       D       Delete       TITLE         NAME       SIREIT ADDRESS       CITY-SI-2P         TITLE       D       Delete       TITLE         NAME       SIREIT ADDRESS       CITY-SI-2P       CITY-SI-2P         TITLE       D       Delete       TITLE         NAME       SIREIT ADDRESS       CITY-SI-2P       CITY-SI-2P         TITLE       D       Delete       TITLE       Change       Addition         NAME       SIREIT ADDRESS       CITY-SI-2P       CITY-SI-2P       CITY-SI-2P       CITY-SI-2P         TITLE       D       Delete       TITLE       NAME       Change       Addition         NAME       SIREIT ADDRESS       CITY-SI-2P       CITY-SI-2P       CITY-SI-2P       CITY-SI-2P	TITLE	D	Delete	TITLE	Loral St	ring the scolo	
Instruction       WRIGHT, EMMA       Instruction       Instruction       Instruction         STREET ADDRESS       661 SW 29TH AVE       STREET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       FT LAUDERDALE, FL 33312       CITY-ST-ZIP         TTLE       D       Delete       TITLE         NAME       FLICKLIN, LULA       Delete       TITLE         STREET ADDRESS       9900 SUNRISE, LAKES BLVD. BLDG APT 203       STREET ADDRESS         CITY-ST-ZIP       SUNRISE, FL 33322       CITY-ST-ZIP         TTLE       D       Delete       TITLE         NAME       PATTERSON, ELAINE       Delete       TITLE         NAME       PATTERSON, ELAINE       STREET ADDRESS       CITY-ST-ZIP         TTLE       Delete       TITLE       Change       Addition         NAME       STREET ADDRESS       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         TITLE       Delete       TITLE       NAME       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         TITLE       Delete       TITLE       NAME       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         TITLE       Delete       TITLE       NAME       STREET ADDRESS	STREET ADDRESS	4701 NW 48TH WAY					
NAME       FLICKLIN, LULA       NAME         STREET ADDRESS       9900 SUNRISE LAKES BLVD. BLOG APT 203       STREET ADDRESS         CITY-ST-ZIP       SUNRISE, FL 33322       CITY-ST-ZIP         TITLE       D       Delete       TITLE         NAME       PATTERSON, ELAINE       ITTLE       Addition         NAME       PATTERSON, ELAINE       STREET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       FT. LAUDERDALE, FL 33311       CITY-ST-ZIP         TITLE       Delete       TITLE       Addition         NAME       STREET ADDRESS       STREET ADDRESS       CITY-ST-ZIP         TITLE       Delete       TITLE       Change       Addition         NAME       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         NAME	דודו ב	WRIGHT, EMMA s 661 SW 29TH AVE		CITY - ST - ZIP			
NAME       PATTERSON, ELAINE       NAME         STREET ADDRESS       1128 NW 3RD ST APT.3       STREET ADDRESS         CITY-SI-ZIP       FT. LAUDERDALE, FL 33311       CITY-SI-ZIP         TITLE       Delete       TITLE         NAME       STREET ADDRESS       CITY-SI-ZIP         TITLE       Delete       TITLE         NAME       STREET ADDRESS       CITY-SI-ZIP         TITLE       Delete       TITLE         NAME       STREET ADDRESS       CITY-SI-ZIP         Its is report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oart; that I am an officer or director of the corporation or the receiver or subset 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 attachor multity an address, with all other like empowered.	NAME STREET ADDRESS	WRIGHT, EMMA 661 SW 29TH AVE	Delete	title Name Sireet address	<b>1</b> 7	Change Addition	
NAME       NAME         STREET ADDRESS       STREET ADDRESS         CITY - ST - ZIP       STREET ADDRESS         12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 supplemental report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachor with an address, with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WRIGHT, EMMA 661 SW 29TH AVE FT LAUDERDALE, FL 33312 D FLICKLIN, LULA 9900 SUNRISE LAKES BLVD. B	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			
indicated on this report or supplemental report is trip 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 tusted 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 andress, with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WRIGHT, EMMA 661 SW 29TH AVE FT LAUDERDALE, FL 33312 D FLICKLIN, LULA 9900 SUNRISE LAKES BLVD. B SUNRISE, FL 33322 D PATTERSON, ELAINE 1128 NW 3RD ST APT.3	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change 🗍 Addition	
SIGNATURE: THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WRIGHT, EMMA 661 SW 29TH AVE FT LAUDERDALE, FL 33312 D FLICKLIN, LULA 9900 SUNRISE LAKES BLVD. B SUNRISE, FL 33322 D PATTERSON, ELAINE 1128 NW 3RD ST APT.3	Delete LDG APT 203 Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change Addition	