

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011151

FILED
Mar 06, 2007
Secretary of State

Entity Name: PROPHETIC HARVEST MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

9010 SOUTH WEST 52 ND STREET
COOPER CITY, FL 33328

New Principal Place of Business:

Current Mailing Address:

9010 SOUTH WEST 52 ND STREET
COOPER CITY, FL 33328

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILLER, PAULA
9010 SOUTH WEST 52ND STREET
COOPER CITY, FL 33328 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: MILLER, PAULA
Address: 9010 SOUTH WEST 52ND STREET
City-St-Zip: COOPER CITY, FL 33328

Title: V () Delete
Name: MILLER, PAULA
Address: 9010 SOUTH WEST 52ND STREET
City-St-Zip: COOPER CITY, FL 33328

Title: D () Delete
Name: CLARKE, STEPHEN
Address: 11060 SOUTH LAKEVIEW DR
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: DUNBAS, ALDENE
Address: 14083 SOUTH WEST 53RD
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: BROWN, DOROTHY
Address: 9010 SOUTH WEST 52ND STREET
City-St-Zip: COOPER CITY, FL 33328

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 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: PAULA MILLER

P

03/06/2007

Electronic Signature of Signing Officer or Director

Date