

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006845

FILED
Jan 29, 2008
Secretary of State

Entity Name: EL-SHADDAI COMMUNITY SERVICES, INC.

Current Principal Place of Business:

14155 WEST DIXIE HIGHWAY
SUITE 18
NORTH MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

14155 WEST DIXIE HIGHWAY
SUITE 18
NORTH MIAMI, FL 33125

New Mailing Address:

FEI Number: 26-0516102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARIMONEL, PAUL
14155 WEST DIXIE HIGHWAY
SUITE 18
NORTH MIAMI, FL 33125 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: C () Delete
Name: DARIMONEL, PAUL
Address: 14155 WEST DIXIE HIGHWAY #18
City-St-Zip: NORTH MIAMI, FL 33125

Title: T () Delete
Name: GARCON, VITEY
Address: 8529 CLARIDGE DRIVE
City-St-Zip: MIRAMAR, FL 33025

Title: S () Delete
Name: CAMPBELL, TRACY
Address: 8529 CLARIDGE DRIVE
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: CAMPBELL, MAGGIE
Address: 1624 S 23RD AVENUE
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: AUGUSTIN, GABRIEL
Address: 14155 WEST DIXIE HIGHWAY #18
City-St-Zip: NORTH MIAMI, FL 33125

Title: D () Delete
Name: CAMPBELL, LEWIN
Address: 14155 WEST DIXIE HIGHWAY #18
City-St-Zip: NORTH MIAMI, FL 33125

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:

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: DARIMONEL PAUL

C

01/29/2008

Electronic Signature of Signing Officer or Director

Date