

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007081

FILED
Apr 30, 2008
Secretary of State

Entity Name: FOOD AND GOSPEL FOR ALL, INC

Current Principal Place of Business:

5869 W MC NAB RD
11
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 5306
POMPAÑO BEACH, FL 33074

New Mailing Address:

FEI Number: 20-8593108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAUVET, ALTIERY
631 KATHY LANE
D
MARGATE, FL 33068 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: CHAUVET, ALTIERY
Address: 631 KATHY LANE APT D
City-St-Zip: MARGATE, FL 33068

Title: VP () Delete
Name: ROMAIN, REGINALD
Address: 5869 W MC NAB RD APT 11
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: SECR () Delete
Name: HILAIRE, MICHEL
Address: 1903 SW 82ND TERRACE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: TR () Delete
Name: CAPRICE, ILAMEAU
Address: 7104 NW 76TH COURT
City-St-Zip: TAMARAC, FL 33321

Title: AD () Delete
Name: VENEUS, MIKEL
Address: 6900 SW 18TH CT
City-St-Zip: NORTH LAUDERDALE, FL 33068

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 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: ALTIERY CHAUVET

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date