2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

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Entity Name: DAUGHTERS OF THE MESSIAH INTERNATIONAL, INC.

Current Principal Place of Business:

1371-1381 N PALM AVE
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1371-1381 N PALM AVE
PEMBROKE PINES, FL 33026

New Mailing Address:

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

Name and Address of Current Registered Agent:

SILVERA, FAYE M REV. DR
1381 N PALM AVE
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

SILVERA, FAYE M DR
1381 N PALM AVE
PEMBROKE PINES, FL 33026 US

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: DR FAYE SILVERA 04/28/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SILVERA, FAYE M REV.DR.
Address: 1381 N PALM AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DS ( ) Delete
Name: MARTIN, MAYRA
Address: 10090 NW 80 CT BLDG 5 APT 1230
City-St-Zip: HIALEAH, FL 33016

Title: DT ( ) Delete
Name: HARRIS, WINDY
Address: 2593 NW 49 AVE 206
City-St-Zip: LAUDERDALE LAKES, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SILVERA, FAYE M DR.
Address: 1381 N PALM AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DS (X) Change ( ) Addition
Name: MARTIN, MAYRA
Address: 1371-1381 N PALM AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DT (X) Change ( ) Addition
Name: DRUMMOND, SHEILA
Address: 1371-1381 N PALM AVE
City-St-Zip: PEMBROKE PINES, FL 33026

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: DR FAYE SILVERA PD 04/28/2009
Electronic Signature of Signing Officer or Director Date