

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004072

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: CHRISTIAN FAITH RESTORATION INC.

**Current Principal Place of Business:**

6702 EAST BROADWAY AVENUE  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

6702 EAST BROADWAY AVENUE  
TAMPA, FL 33619

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: DPS ( ) Delete  
Name: AMAIN, MEOOVER  
Address: 6702 EAST BROADWAY AVENUE  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: AMAIN, WALTEGE  
Address: 6702 EAST BROADWAY AVENUE  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: DUBOIS, YGETTE  
Address: 6702 EAST BROADWAY AVENUE  
City-St-Zip: TAMPA, FL 33619

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: AMAIN, MIMOSE  
Address: 6702 EAST BROADWAY AVENUE  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Change (X) Addition  
Name: AMAIN, MEOOVER  
Address: 6702 E BROADWAY AVE  
City-St-Zip: TAMPA, FL 33619

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: MEOOVER AMAIN

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date