2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2010
Secretary of State

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Entity Name: MAJESTIC DESTINY MINISTRY, CORP.

Current Principal Place of Business:

4217 PALM FOREST DRIVE S
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

4217 PALM FOREST DRIVE S
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 27-0300789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIEBOWITZ, SHARON
4217 PALM FOREST DRIVE S
DELRAY BEACH, FL 33445 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: PD
Name: LIEBOWITZ, SHARON
Address: 4217 PALM FOREST DRIVE S
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD
Name: KAUFFMAN, JANEL
Address: 4217 PALM FOREST DRIVE S
City-St-Zip: DELRAY BEACH, FL 33445

Title: TD
Name: CARSON, ELIASSI S
Address: 2701 NASSAU BEND #G2
City-St-Zip: COCONUT CREEK, FL 33066

Title: SD
Name: SZARO, PAMELA JANE
Address: 4796 ORCHARD LANE
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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 all other like empowered.

SIGNATURE: SHARON LIEBOWITZ PD 01/11/2010

Electronic Signature of Signing Officer or Director — Date