2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2010
Secretary of State

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Entity Name: INTERNATIONAL CHILDREN RESCUE MINISTRIES INC

Current Principal Place of Business:

7127 GRAY SHADOW ST
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

7127 GRAY SHADOW ST
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 27-1069022 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NARCISSE, JOHNNY M
7127 GRAY SHADOW ST
ORLANDO, FL 32818 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
Name: NARCISSE, JOHNNY M
Address: 7127 GRAY SHADOW ST
City-St-Zip: ORLANDO, FL 32818

Title: VP
Name: ZAMOR, ANN JASMINE
Address: 5814 NW WINDY PINES LN
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D
Name: NARCISSE, BAIRNSLER
Address: 9009 GOLF RD #7G
City-St-Zip: DES PLAINES, IL 60016

Title: S
Name: CLICQUOT, MARIE N
Address: 7127 GRAY SHADOW ST
City-St-Zip: ORLANDO, FL 32818

Title: D
Name: NARCISSE, YANNICK
Address: 9009 GOLF RD #7G
City-St-Zip: DES PLAINES, IL 60016

Title: D
Name: JULES, ABDIAS
Address: 5814 NW WINDY PINES LN
City-St-Zip: PORT ST LUCIE, FL 34986

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: JOHNNY M NARCISSE P 01/13/2010

Electronic Signature of Signing Officer or Director — Date