## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10305

FILED Apr 25, 2007 Secretary of State

Entity Name: 'BEZERRA DE MENEZES' KARDECIAN SPIRITIST ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
6450 NW 7	77TH CT						
2ND FLOC	)R						
MIAMI, FL	33166 US						
Current Mailing Address:			New Maili	New Mailing Address:			
6450 NW 7 2ND FLOC MIAMI, FL	)R						
FEI Number:	: 02-0729495	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (X)		
Name and	Address of (	Current Registered Agent:	Name and	l Address o	of New Registered Agent:		
	ANETE T T 77TH COURT 33166 US	2ND FLOOR					
	named entity of Florida.	submits this statement for the p	ourpose of changing i	its registere	d office or registered agent, or bo	th,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered Age	ent		Date	_	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ( LIMA, ELISEU 13401 SW 83 / MIAMI, FL 331		Title: Name: Address: City-St-Zip:	PD ALENCAR, [ 13744 SW 1 MIAMI, FL 3	145 TERRACE		
Title: Name: Address: City-St-Zip:	VPD ( SALAZAR, LUI: 4209 SW 1377 MIAMI, FL US	H COURT	Title: Name: Address: City-St-Zip:	VPD SALAZAR, L 4209 SW 13 MIAMI, FL 3	37TH COURT		
Title: Name: Address: City-St-Zip:	DOMSCHKE, E	RSITY DRIVE, APT 109	Title: Name: Address: City-St-Zip:	1150 NE 13	(X) Change ( ) Addition Z, MARGARITA i7 STREET MI, FL 33161 US		
Title: Name: Address: City-St-Zip:	TD ( ESSU, JEANET 6933 SW 164T MIAMI, FL 331	н ст.	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	ASD ABREU, HO 13025 NW 1 MIAMI, FL	15 AVENUE		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	ATD ANCHELIA, 2040 NORTI HOLLYWOO			

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: JEANETE T ESSU TD 04/25/2007