

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 29, 2007**  
**Secretary of State**

DOCUMENT# N18142

**Entity Name:** EPHPHATHA CHURCH, INC.**Current Principal Place of Business:**5800 NW 2ND AVE  
MIAMI, FL 33127 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX #380982  
MIAMI, FL 33238**New Mailing Address:****FEI Number:** 59-2779640**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PAUL, JOSEPH SAMUEL  
271 NW 148 STREET  
MIAMI, FL 33168 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:** STD ( ) Delete  
**Name:** ANTOINE, MARIE  
**Address:** 68 NW 47TH ST  
**City-St-Zip:** MIAMI, FL**Title:** VD ( ) Delete  
**Name:** ST. FLEUR, SUCCES,  
**Address:** 1410 N.W. 115TH AVENUE  
**City-St-Zip:** MAIMI, FL**Title:** PD ( ) Delete  
**Name:** PAUL, JOSEPH S  
**Address:** 271 NW 148 STREET  
**City-St-Zip:** MIAMI, FL**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:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** OFF ( ) Change (X) Addition  
**Name:** GOUDETTE, JEANNE M OFF  
**Address:** 20406 NW 8TH CT  
**City-St-Zip:** MIAMI, FL 33169 US

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: PAUL SAMUEL JOSEPH

PD

06/29/2007

Electronic Signature of Signing Officer or Director

Date