

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35145

FILED  
May 30, 2005  
Secretary of State

**Entity Name:** PRAYER AND PRAISE INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

2509 DOLPHIN DRIVE  
MIRAMAR, FL 33025 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 69-5329  
MIAMI, FL 332695329 US

**New Mailing Address:**

**FEI Number:** 65-0163819 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

WILSON, RAYMOND  
2509 DOLPHIN DR  
MIRAMAR, FL 33025 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: DP ( ) Delete  
Name: WILSON, DOROTHY  
Address: 2509 DOLPHIN DR  
City-St-Zip: MIRAMAR, FL 33025 US

Title: DST ( ) Delete  
Name: GIBBS, MARTHA A  
Address: 13101 MEMORIAL HIGHWAY UNIT 200  
City-St-Zip: MIAMI, FL 33162 US

Title: DBM ( ) Delete  
Name: BAILEY, BLOSSOM  
Address: 17928 NW 40 CT  
City-St-Zip: MIAMI, FL 33055 US

Title: DBM ( ) Delete  
Name: WILSON, RAYMOND  
Address: 2509 DOLPHIN DR  
City-St-Zip: MIRAMAR, FL 33025 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOROTHY L.WILSON

DP

05/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date