2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2004
Secretary of State

DOCUMENT# N45315

Entity Name: THEO'S MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

3362 N.W. 151 TERRACE
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

3362 N.W. 151 TERRACE
OPA LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 65-0285910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COBBS, EARNEST L
81 BAHMAN AVENUE
OPA LOCKA, FL 33054 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	( ) Delete
Name:	COBBS, ERNEST L.,	
Address:	81 BAHMAN AVENUE	
City-St-Zip:	OPA LOCKA, FL 33054	
Title:	V	( ) Delete
Name:	COBBS, ELLA WASHINGT, ON	
Address:	81 BAHMAN AVENUE	
City-St-Zip:	OPA LOCKA, FL 33054	
Title:	T	( ) Delete
Name:	NAYLOR, GEORGE	
Address:	1600 N.E. 157 TERR.	
City-St-Zip:	N. MIAMI BEACH, FL 33162	
Title:	D	( ) Delete
Name:	GERALD, HALESTINE	
Address:	20310 NW 12TH AVE	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	JONES, DEBORAH	
Address:	20310 NW 12TH AVE	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	JILES, CASSANDRA	
Address:	2410 NW 104TH STREET	
City-St-Zip:	MIAMI, FL 33147	

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:	
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: INGER PUGH REID S 07/20/2004

Electronic Signature of Signing Officer or Director — Date

INGER PUGH REID/SECRETARY
81 BAHMAN AVENUE
OPA LOCKA, FL 33054