2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49474

FILED Mar 22, 2005 Secretary of State

Entity Name: BELIEVERS' ASSEMBLY OF SOUTH FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business:

6565 STIRLING ROAD DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

6565 STIRLING ROAD DAVIE, FL 33314

FEI Number: 65-0393453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MATHEW, JOHN
2325 NW 95TH TERRACE
CORAL SPRINGS, FL 33065
US

PHILIP, MATHAI
15220 DURHAM LANE
DAVIE, FL 33331
US

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: MATHAI PHILIP 03/22/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete VARCHESE, BENJAMIN MATHAI, VARUGHESE Name: Name: 14225 NW 18TH PL Address: 7411 POLK STREET Address: HOLLYWOOD, FL 33024 City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: Title: () Delete Title: (X) Change () Addition THOMAS, GEORGE Name: GEORGE, THOMAS Name: Address: 2931 OSLO AVE. Address: 11041 NORTHSTAR STREET City-St-Zip: COOPER CITY, FL 33026 City-St-Zip: DAVIE, FL 33324 Title: () Delete Title: (X) Change () Addition Name:

Name: MATTHEW, JOHN Name: KURUVILLA, THOMAS
Address: 2325 NW 95 TERRACE Address: 16241 OPAL CREEK DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: WESTON, FL 33331

Title: D () Delete Title: () Change () Addition Name: PHILIP, GEORGE Name:

 Name:
 PHILIP, GEORGE
 Name:

 Address:
 11030 SW 12 CT.
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33025
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 JACKSON, POULOSE
 Name:
 POULOSE, JACKSON

 Address:
 15031 SW 9TH ST.
 Address:
 15031 SW 9TH ST.

 City-St-Zip:
 SUNRISE, FL 33326
 City-St-Zip:
 SUNRISE, FL 33326

Title: D () Delete Title: () Change () Addition

 Name:
 JACOB, SAM
 Name:

 Address:
 6335 HAWKS BLUFF AVE.
 Address:

 City-St-Zip:
 DAVIE, FL 33331
 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: MATHAI PHILIP PRES 03/22/2005