


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 08:00 A
Secretary of State

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| DOCUMENT # N94000000162 |  |
| 1. Entity Name ALICK ANDREW ALI CHRISTIAN MINISTRIES, INC. | |

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| Principal Place of Business 1089 WOODMAN WAY ORLANDO, FL 32818 US | Mailing Address P.O. BOX 681060 ORLANDO, FL 32868-1060 US |
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04162007 No Chg-NP CR2E037 (4/06)

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| 4. FEI Number 59-3220087 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent ALI, ALICK A 1089 WOODMAN WAY ORLANDO, FL 32818 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

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|--|---------------------------------------|
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small> | DATE _____ 05/08/07-80019-004 5.00 |
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| Filing Fee is \$61.25 Due by May 1, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees | 05/08/07-80019-005 61.25 |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PTD ALI, ALICK A 1089 WOODMAN WAY ORLANDO, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VSPD ALI, THERESA E 1089 WOODMAN WAY ORLANDO, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D SAKINO, TATSUYA 1089 WOODMAN WAY ORLANDO, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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|---|---------------------|--|
| SIGNATURE: <u>Rev. Allick A. Ali</u> REV. ALICK A. ALI. | 4-11-2007 | 407-654-6221 407-294-4383 407-297-0998 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date</small> | <small>Daytime Phone #</small> |