2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# N95000001243

Entity Name: J.J. MINISTRIES INC.

Current Principal Place of Business:

19730 S.W 12TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

P O BOX 821867
PEMBROKE PINES, FL 330821867 US

New Mailing Address:

FEI Number: 65-0565063 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICE, BILL
19730 S.W. 12TH ST.
PEMBROKE PINES, FL 33029 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: PD ( ) Delete
Name: MORALES, JOAN
Address: 604 SW 75 TERR
City-St-Zip: N LAUDERDALE, FL 33068

Title: D ( ) Delete
Name: RICE, BILL
Address: 19730 SW 12TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: JONES, WILLIE J
Address: 2261 NW 58TH ST
City-St-Zip: MIAMI, FL 33142

Title: V ( ) Delete
Name: MORALES, FRANCISCO
Address: 604 SW 75 TERR
City-St-Zip: N LAUDERDALE, FL 33068

Title: D ( ) Delete
Name: KING, ELIZABETH
Address: 8021 SANTA FE TRAIL
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORALES, JOAN
Address: 19730 SW 12 ST.
City-St-Zip: PEMBROKE PINES, FL 33029

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

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

Title: V (X) Change ( ) Addition
Name: MORALES, FRANCISCO
Address: 19730 SW 12 ST.
City-St-Zip: PEMBROKE PINES, FL 33029

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: JOAN MORALES PD 03/28/2005

Electronic Signature of Signing Officer or Director — Date