

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003658

FILED
Apr 28, 2007
Secretary of State

Entity Name: JESUS IS ALIVE MINISTRIES PRAISE AND WORSHIP CENTER, INC.

Current Principal Place of Business:

7100 NW 15TH CT
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

7100 NW 15TH CT
MIAMI, FL 33147 US

New Mailing Address:

FEI Number: 65-0601001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, FREDDIE L
2923 NW 58 ST
MIAMI, FL 33142 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: ROBINSON, FREDDIE L
Address: 2923 NW 58 ST
City-St-Zip: MIAMI, FL 33142

Title: VD () Delete
Name: ROBINSON, REBECCA
Address: 2923 NW 58 ST
City-St-Zip: MIAMI, FL 33142

Title: TD () Delete
Name: DAVIS, BETTY
Address: 18905 N.W. 42 PL
City-St-Zip: MIAMI, FL 33055

Title: SD () Delete
Name: HUMPHREY, LUCILL
Address: 12125 NW 21 CT
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: DAVIS, CARL
Address: 3050 NW 71 ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: DAVIS, CATHERINE
Address: 3050 NW 71STREET
City-St-Zip: N MIAMI BEACH, FL 33162

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: D (X) Change () Addition
Name: DAVIS, CATHERINE
Address: 3050 NW 71STREET
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LUCILL HUMPHREY

SD

04/28/2007

Electronic Signature of Signing Officer or Director

Date