2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# N95000004922

Entity Name: COMPASSION MINISTRIES, INC.

Current Principal Place of Business:

10691 NORTH KENDALL DRIVE
SUITE 312
MIAMI, FL 33176 US

New Principal Place of Business:

1953 S. MILITARY TRAIL
WEST PALM BEACH, FL 33415 US

Current Mailing Address:

198 EVERGREEN PKWY
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

1953 S. MILITARY TRAIL
WEST PALM BEACH, FL 33415 US

FEI Number: 65-0622834 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NUNEZ, ALEJANDRO
6361 SUNSET DRIVE
SOUTH MIAMI, FL 33143 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: ARROYO, RUBEN REV.
Address: 15120 S.W. 149 AVE
City-St-Zip: MIAMI, FL 33196

Title: SD ( ) Delete
Name: RIVERA, LOURDES I REV.
Address: 15120 S.W. 149 AVE
City-St-Zip: MIAMI, FL 33196

Title: TD ( ) Delete
Name: PAGAN, LUIS G
Address: 319 32ND ST. JARDINES METROPOLIANOS
City-St-Zip: RIO PIEDRAS PUERTO RICO,

Title: D ( ) Delete
Name: DIAS, LUIS M REV
Address: 12321 SW 190TH STREET
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete
Name: RODRIGUEZ, JOSE R
Address: 15358 SW 43RD TERRACE
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ARROYO, RUBEN REV.
Address: 198 EVERGRENE PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD (X) Change ( ) Addition
Name: ARROYO, LOURDES I
Address: 198 EVERGRENE PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

Title: D (X) Change ( ) Addition
Name: DIAZ, LUIS M REV
Address: 12321 SW 190TH STREET
City-St-Zip: MIAMI, FL 33177

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: RUBEN ARROYO PD 04/29/2004

Electronic Signature of Signing Officer or Director — Date