

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005858

FILED
Apr 23, 2007
Secretary of State

Entity Name: MIRACLES THROUGH PRAYER AND FAITH MINISTRIES INC.

Current Principal Place of Business:

6772 PEMBROKE RD
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3616
HOLLYWOOD, FL 33083 US

New Mailing Address:

FEI Number: 65-0657223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDS, EARL S
3412 S.W. 63 WAY
MIRAMAR, FL 33023 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: D () Delete
Name: RICHARDS, EARL S
Address: 3412 S.W. 63 WAY
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: RICHARDS, JENNIFER
Address: 1221 NW 123RD ST
City-St-Zip: MIAMI, FL 331672317

Title: T () Delete
Name: BRAMMER, CAROL
Address: CASABLANCA DR.
City-St-Zip: MIRAMAR, FL 33023

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:

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: EARL RICHARDS

D

04/23/2007

Electronic Signature of Signing Officer or Director

Date