

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000910

FILED  
Apr 04, 2005  
Secretary of State

**Entity Name:** INTERNATIONAL INTERCESSORS' OF THE BODY OF CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

4410 NW 171 TER  
CAROL CITY, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

4410 NW 171 TER  
CAROL CITY, FL 33055

**New Mailing Address:**

**FEI Number:** 65-0671799

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COOPER, EVELYN  
4762 NW 168 TERR  
MIAMI, FL 33055 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: TD ( ) Delete  
Name: COOPER, EVELYN  
Address: 4762 NW 168 TERR  
City-St-Zip: CAROL CITY, FL

Title: TS ( ) Delete  
Name: CARABALLO, YIRAYMA  
Address: 4371 W 10 LN  
City-St-Zip: HIALEAH, FL

Title: TVP ( ) Delete  
Name: MYERS, MICHAEL  
Address: 4767 NW 168 TERR  
City-St-Zip: CAROL CITY, FL 33055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: COOPER, EVELYN  
Address: 4762 NW 168 TERR  
City-St-Zip: CAROL CITY, FL 33055

Title: TS (X) Change ( ) Addition  
Name: MYERS, YIRAYMA  
Address: 4371 W 10 LN  
City-St-Zip: HIALEAH, FL 33012

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: EVELYN COOPER

TD

04/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date