2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002882

FILED May 04, 2009 Secretary of State

Entity Name: EL-SHADDAI INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3833 NW 42ND WAY COCONUT CREEK, FL 33073 US **Current Mailing Address: New Mailing Address:** 3833 NW 42ND WAY COCONUT CREEK, FL 33073 US FEI Number: 65-0670170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANTOS, ALCIR SANTOS, ALCIR F 501 SE 8TH ST 501 SE 8TH STREET 106 106 DEERFIELD BEACH, FL 33441 US DEERFIELD BEACH, FL 33441 US 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: ALCIR SANTOS 05/04/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SANTOS, ALCIR SANTOS, ALCIR F Name: Name: 501 SE 8TH STREET #106 Address: 501 SE 8TH STREET #106 Address: City-St-Zip: DEERFIELD BEACH, FL 33441 US City-St-Zip: DEERFIELD BEACH, FL 33441 US Title: () Delete Title: () Change () Addition Name: KELLEY, GORETE M Name: Address: 411 POINCIANA ISLAND Address: City-St-Zip: SUNNY ISLES, FL 33160 US City-St-Zip: Title: () Delete Title: () Change () Addition VENOH, SONIA M Name: Name: 800 N MIAMI AVE # 705 Address: Address: City-St-Zip: MIAMI, FL 33136 US City-St-Zip: Title: () Delete Title: () Change () Addition AZEVEDO, REGINALDO Name: Name: 3833 NW 42ND WAY Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: Title: () Delete Title: () Change () Addition AZEVEDO, RUTINEIA S Name: Name: 3833 NW 42ND WAY Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 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: ALCIR SANTOS P 05/04/2009