

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# N96000005659

Entity Name: END TIME MINISTRIES, INC.

Current Principal Place of Business:

14853 NW 7TH AVENUE
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

6511 NW MIAMI PLACE
MIAMI, FL 33150

New Mailing Address:

FEI Number: 65-0730108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHILOGENE, MARIELLE REV
6511 N.W. MIAMI PLACE
MIAMI, FL 33150 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: PHILOGENE, MARIELLE REV.
Address: 6511 N.W. MIAMI PLACE
City-St-Zip: MIAMI, FL 33150

Title: VPD () Delete
Name: PHILOGENE, FRANCK
Address: 6511 N.W. MIAMI PLACE
City-St-Zip: MIAMI, FL 33150

Title: SID () Delete
Name: LAFONTANT, TAMARA
Address: 8012 N.E. 7TH AVENUE
City-St-Zip: MIAMI, FL 33138

Title: T () Delete
Name: BAUCE, WIDELINE
Address: 9390 NW 14 AVENUE
City-St-Zip: MIAMI, FL 33147

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:

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: REV. MARIELLE PHILOGENE

DIR

04/30/2004

Electronic Signature of Signing Officer or Director

Date