2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006
Secretary of State

DOCUMENT# N97000001556

Entity Name: SOUTH FLORIDA FULL GOSPEL ASSEMBLY, INC.

Current Principal Place of Business:

5225 NW 74TH TERRACE
LAUDERHILL, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

5225 NW 74TH TERRACE
LAUDERHILL, FL 33319 US

New Mailing Address:

FEI Number: 65-0752368 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABRAHAM, JOHN PASTOR
5225 NW 74TH TERRACE
LAUDERHILL, FL 33319 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: ABRAHAM, JOHN
Address: 5225 NW 74TH TERRACE
City-St-Zip: LAUDERHILL, FL 33319 US

Title: S ( ) Delete
Name: ABRAHAM, MERCY J
Address: 5225 NW 74TH TERRACE
City-St-Zip: LAUDERHILL, FL 33319 US

Title: T ( ) Delete
Name: CHARLES, CLIFFORD
Address: 321 N. 20TH AVE, APT C2
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: D ( ) Delete
Name: KURIAKOSE, JOJI
Address: 10282 SW 59TH STREET
City-St-Zip: COOPERCITY, FL 33328 US

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 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: JOHN ABRAHAM PD 02/08/2006

Electronic Signature of Signing Officer or Director — Date