2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N97000002534

Entity Name: WORLD MISSION OF JESUS CHRIST, INC.

Current Principal Place of Business:

915 NE 125 ST.
SUITE 204
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

915 NE 125 ST.
SUITE 204
NORTH MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 65-0751362 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SAINT-SEAN, WILFRID REV.
8451 NW 5 AVE
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: D ( ) Delete
Name: DENIS, SARAH J
Address: 12024 SW 270 STREET
City-St-Zip: NAVRANJA, FL 33032

Title: T ( ) Delete
Name: ANGE-NIOLINE, GIORDANY
Address: 945 NE 125 STREET
City-St-Zip: N. MIAMI, FL 33161

Title: P ( ) Delete
Name: SAINT-JEAN, WILFRID
Address: 17903 SW 2 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S ( ) Delete
Name: EMMANUELA, ALEXIS
Address: 8451 NW 5 AVE
City-St-Zip: MIAMI, FL 33150

Title: AS ( ) Delete
Name: MOMPLAISIR, JEFFREY I
Address: 1470 NE 136 ST
City-St-Zip: MIAMI, FL 33161

Title: VP ( ) Delete
Name: PORRO, WILLIAM
Address: 18804 NW 79 WAY
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: ANGE-NIOLINE, SAINT-JEAN
Address: 945 NE 125 STREET
City-St-Zip: N. MIAMI, FL 33161

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 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: WILFRID SAINT-JEAN P 04/30/2009

Electronic Signature of Signing Officer or Director — Date