

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 23, 2007
Secretary of State

DOCUMENT# N97000006837

Entity Name: TRUST AND JOY TO HELP ALL JESUS CHILDREN INTERNATIONAL INC.**Current Principal Place of Business:**306 LANDCASTER ROAD
ORLANDO, FL 32809**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 622214
ORLANDO, FL 32862**New Mailing Address:****FEI Number:** 65-0678304**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORAME, JULIA
4700 SPOTTSWOOD DR.
ORLANDO, FL 32812 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: P () Delete
Name: MORAME, HENRILUS REV
Address: 4567 COVE DRIVE, APT 103
City-St-Zip: ORLANDO, FL 32807

Title: V () Delete
Name: MORAME, JULIA
Address: 4567 COVE DRIVE, APT 103
City-St-Zip: ORLANDO, FL 32807

Title: BM () Delete
Name: FISHER, FABIOLA
Address: 1077 METRO WEST
City-St-Zip: ORLANDO, FL

Title: BM () Delete
Name: NEREUS, VEYONNE
Address: 1440 ABBERTON DR.
City-St-Zip: ORLANDO, FL 32837

Title: BM () Delete
Name: ST. JEAN, JACKOBERT
Address: 2813 GREENFIELD AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: BM () Delete
Name: NEREUS, DENIS REV.
Address: 306 LANDCASTER ROAD
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: MORAME, JULIA
Address: 4567 COVE DRIVE, APT 103
City-St-Zip: ORLANDO, FL 32807

Title: BM (X) Change () Addition
Name: JEAN, DAVID
Address: 1077 METRO WEST
City-St-Zip: ORLANDO, FL

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: JULIA MORAME

VP

03/23/2007

Electronic Signature of Signing Officer or Director

Date