

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001406

FILED
Mar 29, 2008
Secretary of State

Entity Name: TOUCHING MIAMI WITH LOVE MINISTRIES, INC.

Current Principal Place of Business:

711 NW 6TH AVENUE
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

PO BOX 013279
MIAMI, FL 33101

New Mailing Address:

FEI Number: 65-0831654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JASON, PITTMAN B MR.
711 NW 6TH AVENUE
MIAMI, FL 33136 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: DANIEL, VINCENT
Address: 1550 N. MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

Title: VPD () Delete
Name: LISA, WHITE
Address: 12740 SW 71ST AVENUE
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: WHITEHEAD, ROSA
Address: 6053 SW 63RD TERRACE
City-St-Zip: MIAMI, FL 33143

Title: TD () Delete
Name: GILDA, FERRADAZ
Address: 401 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33128

Title: D () Delete
Name: RAYMOND, JOHNSON
Address: PO BOX 2556
City-St-Zip: LAKELAND, FL 33806

Title: D () Delete
Name: SHAFER, AIDA
Address: 4206 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WHITE, LISA MRS.
Address: 12740 SW 71ST AVENUE
City-St-Zip: MIAMI, FL 33156

Title: VPD (X) Change () Addition
Name: FERRADAZ, GILDA MRS.
Address: 401 NW 2ND AVENUE SUITE N-1007
City-St-Zip: MIAMI, FL 33128

Title: SD (X) Change () Addition
Name: WOOD, SUE MRS.
Address: 1426 SANTA CRUZ AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change () Addition
Name: SHAFER, AIDA MRS.
Address: 4206 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

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

Title: D (X) Change () Addition
Name: VICENT, DANIEL MR.
Address: 1550 NORTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

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: LISA WHITE

PD

03/29/2008

Electronic Signature of Signing Officer or Director

Date