

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001406

FILED  
Apr 30, 2012  
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:**

PITTMAN, JASON 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  
Name: BACON, PHIL MR.  
Address: 150 SE 2ND AVENUE  
City-St-Zip: MIAMI, FL 33131

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

Title: SEC  
Name: VAIR, BETTY MRS.  
Address: 10900 SW 84TH CRT  
City-St-Zip: MIAMI, FL 33156

Title: D  
Name: TSCHIRHART, BRIAN MR.  
Address: 8250 SW 116TH TERRACE  
City-St-Zip: MIAMI, FL 33156

Title: VP  
Name: GILDA, FERRADAZ MRS.  
Address: 401 NW 2ND AVENUE SUITE N-1007  
City-St-Zip: MIAMI, FL 33128

Title: D  
Name: MARLENE, RIESCO MRS.  
Address: 2109 COUNTY CLUB PRADO  
City-St-Zip: CORAL GABLES, FL 33146

I hereby 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 all other like empowered.

SIGNATURE: JASON PITTMAN

ED

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date