


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90168 039 ****61.25

DOCUMENT # N98000002916

1. Entity Name
THE NEW JERUSALEM PRAYER MINISTRIES INTERNATIONAL, INC.



Principal Place of Business
**6021 NW 6TH COURT
 MIAMI, FL 33127**

Mailing Address
**PO BOX 472673
 MIAMI, FL 33247**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State


Zip Country

4. FEI Number
65-0838735

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

01052006 Chg-NP CR2E037 (11/05)



6. Name and Address of Current Registered Agent

**THOMPSON, MARY P
 942 NW 65TH STREET
 MIAMI, FL 33150**

7. Name and Address of New Registered Agent

Name
Thompson, Mary P.

Street Address (P.O. Box Number is Not Acceptable)
6033 NW 6th Court

City
MIAMI

FL Zip Code
33127

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Mary P. Thompson MARY P. THOMPSON DATE 4/11/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMPSON, EUGENE II 660 NW 81ST STREET, #916 MIAMI, FL 33150 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLAYTON, RUDOLPH 13851 SW 282ND STREET HOMESTEAD, FL 33033 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMPSON, MARY 660 NW 81ST STREET, # 916 MIAMI, FL 33150 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMPSON, ROSALIE 6033 N.W. 6TH COURT MIAMI, FL 33127 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, TONYA 2701 NW 13TH COURT FORT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROOKS, DENISE 5421 SW 22ND COURT HOLLYWOOD, FL 33023 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Thompson, Eugene II 6033 NW 6th Court MIAMI, FL 33127 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ELISTON, TONYA 451 NW 7th St #102 MIAMI, FL 33136 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary P. Thompson MARY THOMPSON DATE 4/11/06 (305) 756-1933

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR