

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003072

FILED
Mar 14, 2007
Secretary of State

Entity Name: MIRACLE FAITH CENTER, INC.

Current Principal Place of Business:

421 N. PALAFOX
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

421 N. PALAFOX
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 91-1907647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARFOUCHE, CHRISTIAN DR
421 N PALAFOX
PENSACOLA, FL 32501 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: HARFOUCHE, CHRISTIAN
Address: 421 N. PALAFOX
City-St-Zip: PENSACOLA, FL 32501

Title: ST () Delete
Name: HARFOUCHE, ROBIN
Address: 421 N. PALAFOX
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DR. CHRISTIAN HARFOUCHE (SIGNED BY C.M.L.)

PRES

03/14/2007

Electronic Signature of Signing Officer or Director

Date