

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004249

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** WORD OF VICTORY MINISTRIES, INC.

**Current Principal Place of Business:**

10960 SW 71 LN  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

10960 SW 71 LN  
MIAMI, FL 33173

**New Mailing Address:**

**FEI Number:** 65-0931747

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAVILANES, CAROLINA  
10960 SW 71 LN  
MIAMI, FL 33173 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: PSD ( ) Delete  
Name: GAVILANES, CAROLINA  
Address: 10960 SW 71 LN  
City-St-Zip: MIAMI, FL 33173

Title: VTD ( ) Delete  
Name: TORRES, GRACE L  
Address: 10960 SW 71 LN  
City-St-Zip: MIAMI, FL 33173

Title: SD ( ) Delete  
Name: BEDOYA, LUZ A  
Address: 10960 SW 71 LN  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: CAROLINA GAVILANES

P

04/29/2006

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

\_\_\_\_\_  
Date