


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90234 012 ****75.00

DOCUMENT # N98000007027	
1. Entity Name	
COMFORT YE MY PEOPLE FELLOWSHIP OUTREACH MINISTRY CENTER INC	

Principal Place of Business	Mailing Address
SOUTH DIXIE 17013 HWY MIAMI FL 33157	SOUTH DIXIE 17013 HWY MIAMI FL 33157

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)	
4. FEI Number 65-0880808	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	



6. Name and Address of Current Registered Agent	
WARREN, MARY MRS 4470 NW 178 STREET MIAMI FL 33055	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	CAMEJO, LYDIA T
STREET ADDRESS	1230 NW 9TH AVENUE
CITY-ST-ZIP	MIAMI FL 33136
TITLE	D <input type="checkbox"/> Delete
NAME	JARVIS, ANICKA
STREET ADDRESS	1250 NW 144 AVE
CITY-ST-ZIP	PEMBROKE PINES FL 33028
TITLE	D <input type="checkbox"/> Delete
NAME	FORD, LORETTA
STREET ADDRESS	1931 NW 194TH TERRACE
CITY-ST-ZIP	MIAMI FL 33056
TITLE	BOD <input type="checkbox"/> Delete
NAME	HINSON, MAVIS
STREET ADDRESS	17280 SW 149TH AVENUE
CITY-ST-ZIP	MIAMI FL 33186
TITLE	BOD <input type="checkbox"/> Delete
NAME	TITUS, HYACINTH
STREET ADDRESS	13409 SW 116TH COURT
CITY-ST-ZIP	MIAMI FL 33176
TITLE	T <input type="checkbox"/> Delete
NAME	BROOKS, HEATHER
STREET ADDRESS	13409 SW 116TH COURT
CITY-ST-ZIP	MIAMI FL 33176

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Lydia Thompson Camejo

4-4-06 305 9713462