

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002105

Entity Name: GARIFUNA CHURCH, INC.

FILED
May 10, 2006
Secretary of State

Current Principal Place of Business:

4148 NW 45 TERRACE
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

4148 NW 45 TERRACE
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: 65-0925784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DOMINGUEZ, MARIO PASTOR
4148 NW 45 TERRACE
LAUDERDALE LAKES, FL 33319 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 () Delete
Name: DOMINGUEZ, MARIO PASTOR
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: SD () Delete
Name: PALACIOS, EVANGELISTA
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TD () Delete
Name: MEDINA, TEOFILA
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D () Delete
Name: PALACIOS, OSCAR
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: VD () Delete
Name: DOMINGUEZ, LORETTA
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: C () Delete
Name: OSCAR, COLON
Address: 4148 NW 45TH TERR
City-St-Zip: LAUD LAKES, FL 33319

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: LORETTA, DOMINGUEZ I
Address: 4148 NW 45 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

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: LORETTA DOMINGUEZ

VD

05/10/2006

Electronic Signature of Signing Officer or Director

Date