

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003947

FILED  
Jan 19, 2007  
Secretary of State

**Entity Name:** WORD OF FAITH WORLD OUTREACH MINISTRY, INC.

**Current Principal Place of Business:**

9488 SW 154 AVE.  
MIAMI, FL 331961142 US

**New Principal Place of Business:**

8250 NW 27 STREET  
SUITE # 307  
DORAL, FL 331221904 US

**Current Mailing Address:**

P. O. BOX 960580  
MIAMI, FL 332960580 US

**New Mailing Address:**

8250 NW 27 STREET  
SUITE # 307  
DORAL, FL 331221904 US

**FEI Number:** 65-1029981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TOVAR, LUIS G PRESIDE  
9488 SW 154 AVE.  
MIAMI, FL 331961142 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: TOVAR, LUIS G PRES  
Address: 9488 SW 154 AVE.  
City-St-Zip: MIAMI, FL 331961142

Title: AD ( ) Delete  
Name: TOVAR, SABAA VP-TD  
Address: 9488 SW 154 AVE.  
City-St-Zip: MIAMI, FL 331961142

Title: SD ( ) Delete  
Name: TOVAR, SABAA E SD  
Address: 9488 SW 154 AVE.  
City-St-Zip: MIAMI, FL 331961142

**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: DR. LUIS G. TOVAR, APOSTLE-PRESIDENT

PRES

01/19/2007

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

\_\_\_\_\_  
Date