

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003947

FILED
Jun 03, 2008
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

1645 SW 107 AV
MIAMI, FL 33165 US

Current Mailing Address:

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

New Mailing Address:

PO BOX 960578
MIAMI, FL 33296

FEI Number: 65-1029981 **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:

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 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

PRES

06/03/2008

Electronic Signature of Signing Officer or Director

Date