

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006138

FILED  
Apr 26, 2005  
Secretary of State

**Entity Name:** MINISTRY OF MIRACLES INTERNATIONAL YOUTH MINISTRIES, INC.

**Current Principal Place of Business:**

6895 S.W. 16TH STREET  
PEMBROKE PINES, FL 33023

**New Principal Place of Business:**

13841 SW 36 CT  
DAVIE, FL 33330

**Current Mailing Address:**

13841 SW 36 CT  
DAVIE, FL 33330 US

**New Mailing Address:**

**FEI Number:** 65-0968134      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FOX, BARI  
6895 S.W. 16TH STREET  
PEMBROKE PINES, FL 33023 US

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

FOX, BARI  
13841 SW 36 CT.  
DAVIE, FL 33330 US

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: MARGE BAMBURY

04/26/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEOD ( ) Delete  
Name: FOX, BARI  
Address: 6895 SW 16TH ST  
City-St-Zip: PEMBROKE PINES, FL 33023

Title: COOD ( ) Delete  
Name: WADDELL, JULEEN  
Address: 6895 SW 16TH ST  
City-St-Zip: PEMBROKE PINES, FL 33023

Title: AD ( ) Delete  
Name: BAMBURY, MARGE  
Address: 13841 SW 36TH CT  
City-St-Zip: DAVIE, FL 33330

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

Title: CEOD (X) Change ( ) Addition  
Name: FOX, BARI  
Address: 1046 PADDINGTON TERRACE  
City-St-Zip: HEATHROW, FL 32746

Title: COOD (X) Change ( ) Addition  
Name: WADDELL, JULEEN  
Address: 9036 NW 60 STREET  
City-St-Zip: TAMARAC, FL 33321

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 Section 119.07(3)(i), 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: MARGE BAMBURY

ADM

04/26/2005

Electronic Signature of Signing Officer or Director

Date