2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000037958

Entity Name: SHEWBREAD MINISTRIES, INC.

FILED May 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7161 PEMBROKE ROAD SUITE 1 PEMBROKE PINES, FL 33023 **New Mailing Address: Current Mailing Address:** 2241 S. SHERMAN CIRCLE #C-215 MIRAMAR, FL 33025 FEI Number: 65-1099190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, RHONDA 2241 S. SHERMAN CIRCLE SUITE #C-215 MIRAMAR, FL 33025 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ANDERSON, RHONDA Name: Name: ANDERSON, RHONDA 2241 SHERMAN CIRCLE SO. C215 2241 SHERMAN CIRCLE SO. #C215 Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025 Title: VD Title: VD () Delete (X) Change () Addition Name: JOYNER, NATHALIE Name: ANDERSON, EDWARD 2241 SHERMAN CIRCLE S. C215 2241 SHERMAN CIRCLE SO. #C215 Address: Address: MIRAMAR, FL 33025 MIRAMAR, FL 33025 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition JOYNER, NATHALIE Name: Name: 2241 SHERMAN CIRCLE SO. #C125 Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: () Delete Title: () Change () Addition ROBINSON, TOSHA Name: Name: Address: 2001 PRAIRIE DUNES VILLAGE CIRCLE Address: City-St-Zip: LAKEWORTH, FL 33463 City-St-Zip: Title: Title: () Delete () Change () Addition ANDERSON, RHONDA Name: Name:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RHONDA ANDERSON PD 05/02/2008

2241 SHERMAN CIRCLE SO. #C215

MIRAMAR, FL 33025

Address: City-St-Zip: