

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020986

FILED
Apr 02, 2009
Secretary of State

Entity Name: ELOHIM JIREH INVESTMENTS, INC.

Current Principal Place of Business:

1436 DREXEL AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD SUITE 1050
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-2317890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON SUITE 1050
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACOBO, JOSE S
Address: 410 ESPANOLA WAY
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: DIB BUFARAH, JAMIL F
Address: 410 ESPANOLA WAY
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: ARAOZ, EDUARDO
Address: 410 ESPANOLA WAY
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: HURTADO, HECTOR P
Address: 410 ESPANOLA WAY
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEGAVENTURA LLC,
Address: 2121 PON CE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

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

SIGNATURE: EDUARDO ARAOZ

SD

04/02/2009

Electronic Signature of Signing Officer or Director

Date