## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000066036

PUNAL, JULIO C

MIAMI, FL 33183

13700 S.W. 62ND STREET, #241

Name:

Address:

City-St-Zip:

Entity Name: 7NE DAY MINISTRIES, INC.

FILED Apr 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11740 S.W. 107TH AVENUE MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 11740 S.W. 107TH AVENUE MIAMI, FL 33176 FEI Number: 20-2833942 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: GACKLE, GEOFF 11740 S.W. 107TH AVENUE MIAMI, FL 33176 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition GACKLE, GEOFF Name: Name: 5301 S.W. 77TH COURT #102G Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: Title: () Delete () Change () Addition Name: JIMENEZ, DESI Name: 14885 S.W. 172 STREET Address: Address: MIAMI, FL 33187 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition HALE, DANIEL S Name: Name: 11740 S.W. 107 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

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

Name:

Address:

City-St-Zip:

SIGNATURE: GEOFF GACKLE D 04/28/2006