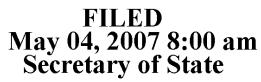
## 2007 FOR PROFIT CORPORATION



ANNOAL KEFOKI					_ Secretary or State					
DOCUMENT # P94000018534  1. Entity Name LIGHTHOUSE BIBLE BOOKSTORE INC.							07 90093 0	10 ***15	50.00	
Principal Place	e of Business	Mailing Address	Mailing Address		401	05917				
7339 EAST COLONIAL DR		7339 EAST COLONIAL DR			702	000				
SUITE 6		SUITE 6								
ORLANDO, FI	L 32807	ORLANDO, FL 32807								
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01232007	Chg-P	CR2E03	34 (12/06)		
City & State		City & State			4. FEI Number 65-0469			No	plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate of	f Status Desired		8.75 Add ee Require		
	6. Name and Address of Current	Registered Agent	Name		7. Name and	Address of Nev	v Registered A	gent		
CARDONA, TOMAS										
6221 SW 138TH CT			Street A	Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL	33183·									
			City				FL	Zip Cod	e	
	named entity submits this statement fi ions of registered agent.	or the purpose of changing its re	gistered office o	registe	red agent, or both	, in the State of	Florida, 1 am fa	amiliar with,	and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE										
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.   Trust Fund Contribution.   Added to Fees										
10.	OFFICERS AND		11.	· · · · ·	ADDITIONS/0	HANGES TO C	OFFICERS AND	_		
TITLE NAME	PVST CARDONA, TOMAS	Delete	TITLE NAME					☐ Change	Addition	
STREET ADDRESS	6221 SW 138TH CT		STREET ADDRESS							
CITY-ST-ZIP	MIAMI, FL 33183		C(TY-ST-ZIP							
TITLE	V	☐ Delete	TITLE					Change	Addition	
NAME	CARDONA, KARLA		NAME							
STREET ADDRESS	6221 SW 138TH CT		STREET ADDRESS							
CITY-ST-ZIP	MIAMI, FL 33183		CITY-ST-ZIP	ļ			· · ·		<u> </u>	
NAME		☐ Delete	. TITLE NAME					Change	Addition	
STREET ADDRESS			STREET ADDRESS	†						
CITY-ST-ZIP			CITY-ST-ZIP	1						
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME			NAME							
STREET ADDRESS	ŀ		STREET ADDRESS CITY-ST-ZIP							
CITY-ST-ZIP		<u> </u>						C 0		
TITLE NAME		Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS							
CITY-S1-ZIP			CITY-ST-ZIP							
TITLE		☐ Defete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP	certify that the information supplied will on this report or supplemental report	Land Pitan days a second	CITY-ST-ZIP		d to Observe 4 **	Flacials Occ	- 16			
L 12 I DATABY										

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR