

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000102401 1. Entity Name HALLELUJAH CHILDREN, INC.			
Principal Place of Business 3161 W OAKLAND PARK BLVD FORT LAUDERDALE FL 33311-1229		Mailing Address 10403 LIMA ST. COOPER CITY FL 33026	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
			
		1st MOORE CR2E034 (10/05)	
		4. FEI Number 65-0965134 Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KWAK, PAUL 10403 LIMA ST. COOPER CITY FL 33026		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-electing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution ☐	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	☐ Delete	
NAME	PAUL, KWAK		
STREET ADDRESS	10403 LIMA STREET		
CITY-ST-ZIP	HOLLYWOOD FL 33026		
TITLE	O	☐ Delete	
NAME	KWAK, SUNG H		
STREET ADDRESS	10403 LIMA STREET		
CITY-ST-ZIP	HOLLYWOOD FL 33026		
TITLE		☐ Delete	
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NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if 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

3/23/06

Date

Daytime Phone #