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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N08377

1. Corporation Name

MIAMI REVIVAL TABERNACLE ASSEMBLY OF GOD, INC.

Principal Place of Business

%SELWYN SCOTT 2085 NW 97TH STREET MIAMI FL 33147

Mailing Address

%SELWYN SCOTT 2085 NW 97TH STREET MIAMI FL 33147



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

03/27/1985

4. FEI Number

59-2246098

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SCOTT, SELWYN 2085 NW 97TH STREET MIAMI FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD DELETED NAME SELWYN, SCOTT STREET ADDRESS 1021 NW 200TH TERRACE CITY-ST-ZIP MIAMI FL

TITLE TD DELETED NAME BLAIR, J.M. STREET ADDRESS 1100 NW 116 TERRACE CITY-ST-ZIP MIAMI FL

TITLE SD DELETED NAME SIMMONS, VALGENE STREET ADDRESS 7520 ALHAMBRA BLVD. CITY-ST-ZIP MIRAMAR FL

TITLE D DELETED NAME BYER, CARLYLE STREET ADDRESS 19410 NW 8 STREET CITY-ST-ZIP PEMBROKE PINES FL

TITLE D DELETED NAME SMITH, THIRLEE, SR. STREET ADDRESS 1386 NW 38 ST. CITY-ST-ZIP MIAMI FL

TITLE D DELETED NAME HOLLIS, HENRY STREET ADDRESS 9800 NW 19 AVENUE CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE D 4.2 NAME Coke, Keith 4.3 STREET ADDRESS 19740 NW 4th Avenue Miami, FL 4.4 CITY-ST-ZIP 33169

5.1 TITLE D 5.2 NAME Foster, Elmer 5.3 STREET ADDRESS 360 NW 102 Terrace Pembroke Pines, FL 5.4 CITY-ST-ZIP 33026

6.1 TITLE D 6.2 NAME Seymore, Roderick 6.3 STREET ADDRESS 2680 NW 123 Street Miami, FL 6.4 CITY-ST-ZIP 33167

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 or is attached to an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SELWYN SCOTT

Feb. 16, 1999 (305)693-1356

Date

Daytime Phone #

CR2E037 (1/198)