SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 23 1998 8:00am Secretary of State

DOCUMENT #	N93000005287	(8)
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	DV 6114DEL 65 141414 DEAG	311 1110			
CALVARY CHAPEL OF MIAMI BEACH, INC.			A ARANATAY RED TRADA ANNO RANGO REFORMA	IN CONSTRUCTOR CONTRACTOR CONTRAC	
Principal Pl	lace of Business	Malling Address			rei Ganer Affide Dierer einer iffite ener ebat
420 LINCOL	N RD	420 LINCOLN RD	42 ح	3. Date Incorporated or Qualified	
MIAMI BEACH FL 83139 MIAMI BEACH FL 83139			11/16/1993		
US	UN FE 63135	US		4. FEI Number	Applied For
				65-0479922	Not Applicable
21	al Place of Business	2a. Malling Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Sulte, Apt. #, etc. 22 # 324 27 # 324		_	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State City & State					
23				7. Is this nonprofit corporation a homeowners association? Yes No	
Zip	Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible
24	25	29 3	30	Personal Property Tax due June 3	30. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Reg	Istered Agent
			81 Name	FOUNTAIN, ROBBA	z.J
_EOUNTA	un, røbert			dress (P.O. Box Number is Not Acceptable)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N.E. STH COURT			ONE 9th COURT	<u></u>
BISGAYI	NE PARK FL 93181		83		
			84 City	SCAYNE PARK	- 85 Zip Code
				<u> </u>	FL 85 Zip Code 3316/
11. Pursuar office or	nt to th e provisions of sections 617,0502 r regis tere d agent, or both, in the State	and 617.1508, Florida Statutes, to of Florida. Such change was auth	he above-named corpor orized by the corporation	ration submits this statement for the purpos on's board of directors. I hereby accept the	e of changing its registered appointment as registered
agent. I	am tamiliar with and accept the obliga	itions of, section 617.0503, Florida	a Statutes.	1 .	_
SIGNATUR	Signature, typed of printed name of registered age	ROBIERT FOUNTA	PASTOP Registereti Agent signature rec	DIRECTOR	7-18-98
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	р	M DELETE	1.1 TITLE	(1350)	
NAME	RAZZ, VAZQUEZ	42	1,2 NAME		1 (Change I FAddition)
STREET ADORES					
CITY-ST-ZIP			1.3 STREET ADDRESS		
	JANAMI FL				
TITLE	MIAMI FL.	X OELETE	1.3 STREET ADDRESS		
	D	★ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	D TCHIVIDITAN, STEPHAN— 115\$ HILLOBORO MILE, UNIT 1		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		
TITLE NAME	D TCHIVIDJIAN, STEPHAN		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change Addition
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TITLE NAME STREET ADDRES CITY-ST-ZIP	D TEMPIDIAN, STEPHAN 1150 HILLOBORO MILE, UNIT 1 HILLOBORO BEACH FL 33062 D FOUNTAIN, ROBERT	P808	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	OUNTAIN, ROBERT	Change Addition
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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 1

SIGNATURE:

REMAID WED OR PRINTED HAME OF SIGNING OFFICER OR DIRECT

FOUNTAIN

5 98 305 531-2°