FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION**

ANNUAL REPORT

1998

I hereby certify that the information su indicated on this annual report or sup-officer or director of the corporation of Block 12 or Block 13 if changes, or on



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1998 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000002589 (7)

ASSEMBLY OF THE VOICE OF THE SEVENTH ANGEL, INC.

| 1 | | | | | | | | | | | | | |
|--|------------------|--------------------------------------|--------------|--------------------------------------|-------------|----------|-----------------|--|--|--|----------------|---|--|
| Principal Place of Business Mailing Address | | | | | | | | T IDDINIBA DIR IRIID BAIN BONN BORN BRIN BRIN ROMA | 10 100; B | /E4 16110 1911 1881 | | | |
| 202 NE 11TH AVENUE BOYNTON BEACH FL 33435 | | | | PO BOX 7094 DELRAY BEACH FL 33484 | | | | | 3. | Date Incorporated or Qualified 05/15/1996 | | | |
| | | | | | | | | | 4. | FEI Number | | Applied For | |
| | | | | | | | | | ~ | 65-0328282 | | Not Applicable | |
| 2. Principal Pi | ace of Busi | ness | 2a. | Mailing Address | | | | | | | | 5 Additional | |
| 21 | | | 26 | | | | | | 5. | Certificate of Status Desired | | Required | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | 8. | Election Campaign Financing | | O May Be | |
| 22 | | | | 27 | | | | | - | Trust Fund Contribution | | d to Fees | |
| City & State | 9 | | City & State | | | | | | 7. Is this nonprofit corporation a homeowners association? | | | | |
| 23 | | | | 28 | | | | | ☐ Yes ☐ No | | | | |
| Zip | | | | Zip Country | | | | | 8. | This corporation owes or has paid the cur | rent year | | |
| 24 | 25 | | | 9 30 | | | | | Personal Property Tax due June 30. Yes No | | | | |
| | 9. Name | and Address of Current | Regis | itered Agent | | | | | 10. | Name and Address of New Registered | Agent | | |
| | | | | | | 81 | Nar | ne | | | | | |
| FRANCO |)IS, FENOI | L | | | | 82 | Stre | et Addres | dress (P.O. Box Number is Not Acceptable) | | | | |
| | tlantic (| | | | | <u> </u> | | | | | | | |
| BOYNTO |)n be ach | FL 33435 | | | | 83 | | | | | | | |
| * 42 2 | | | | | | 84 | City | , | | | 85 Z | ip Code | |
| 11. Pursuant | to the provis | sions of Sections 617.0502 | and 6 | 17.1508. Florida Statu | ites, the | abov | l e-nam | ed corpo | ration | n submits this statement for the purpose of | changing | a its registered | |
| office or r | egistered a | gent, or both, in the State of | of Florid | da. Such change was | authoriz | ed b | y the o | corporatio | n's b | n submits this statement for the purpose of poard of directors. I hereby accept the app | ointment | as registered | |
| | (1) populital v | itti, and accept the obligat | .ioris oi | 1, 36000H 0 17.0303, F | ionua oi | rataté: | ٥, | | | | | | |
| SIGNATURE . | Signature, types | d or printed name of registered agen | I and litle | of applicable. (NC | TE: Registe | red Age | ent sign | ture required | d when | reinstating) DATE | | | |
| 12. | | OFFICERS AND | | | 13 | | | | | ADDITIONS/CHANGES TO OFFICERS AND | DIRECT | ORS IN 12 | |
| TITLE | DΡ | | | DELETE | 1.1 | TITLE | DI | | 7 | ancois tent | Chang | e Addition | |
| NAME | FRANC | ois, fenol | | | 1.2 | NAME | | Ta | ,'~ | S. Atlantic Ox | 9 | | |
| STREET ADDRESS | 120 SO | OUTH ATLANTIC DRIVE | | | 1.3 | STREET | r ad dre | ss 💍 | | 3, M 62776 UK | | | |
| CITY-ST-ZIP | BOYNT | ON BEACH FL 33435 | | | 1.4 | CITY-S | ST-ZIP | _ \@ | O | ynton Bch.7133 | | | |
| TITLE | DVP | | | ☐ DELETE | 2:1 | TITLE | DY | 7 | 0 | urince John | Chang | e 🔲 Addition | |
| NAME | | ice, Johnny | | | | NAME | - • | | | SE 4th Ave | יט' | | |
| STREET ADDRESS 110 SE 4TH AVENUE | | | | 235 | | | | | | ynton Bch Fl 33 | "ZC | P | |
| CITY-ST-ZIP | | ON BEACH FL 33435 | | | 2.4 | CITY- | ST-ZIP | 10 | | 9111011 1914 41 33 | | | |
| TITLE | DS | | | DELETE | 3.1 | TITLE | | | 5 | <i>V</i> ' — | □ Chang | e 🔀 Addition | |
| NAME | | AM, JACCILIEN | | / \ | 32 | NAME | | | | Lows lean | | | |
| STREET ADDRESS | | ERGREEN DRIVE | | | 3.3 | STREET | r a ddre | ss 2 | 0 | 45 W Acabulco | De | | |
| CITY-ST-ZIP | | ARK FL 33403 | | | | . CITY- | ST-ZIP | 1.7 | ŭ. | 11.3mac 71 320 | 45 | | |
| TITLE | DT | | | ☐ DĒLĒTE | 4.1 | TITLE | D | r - | | | La Chang | ge 🔲 Addition | |
| NAME | | IOS, SAGET | | | 4.2 | 2 NAME | | | | ancois safet | • , | | |
| STREET AODRESS | | NORTH STREET | | | 4.3 | STREET | F ADDRE | ss 8 3 | 26 | 6 South N 5tre | eT | | |
| CITY-ST-ZIP | LAKE V | VORTH FL 33460 | | T on our | | CITY-S | ST - ZIP | 10 | W | worth FI 334 | (Q | 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | |
| TITLE | | | | ☐ DELETE | | TITLE | | | | · | ∪nang | ge Addition | |
| NAME | | | | | | NAME | | | | | | | |
| STREET ADDRESS | | | | | - 6 | | ADDAE | SS | | | | | |
| CITY-ST-ZIP | | | | 1 Secret | | CITY-S | ST-ZIP | | | | T 05 | n Talakista | |
| TITLE | | | | ☐ DELETE | | TITLE | | | | | L Chang | je 🔲 Addition | |
| NAME | | _ | | | | NAME | | | | | | | |
| STREET ADDRESS | | \wedge | | | 6.3 | STREET | T ADDRE | SS | | | | | |

6.4 CITY - ST - ZIP

oplied with this filing does not qu

lemental annual report is true a lihe receiver or trustee empowe

for the exemption stated in Section 119.07(3)(i), Florida Statutes I further certify that the information

rate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 617. Florida Statutes; and that my name appears in