2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001035

FILED Apr 01, 2004 Secretary of State

Entity Name: CATHEDRAL OF THE MESSIAH WORSHIP CENTER, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
1381 N. PA PEBROKE	ALM AVE. E PINES, FL 33026			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
1381 N. PA PEBROKE	ALM AVE. E PINES, FL 33026			
FEI Number:	: 65-0818050 FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
	FAYE M 181ST TERR. , FL 33029 US			
	named entity submits this statement for the purpe of Florida.	pose of changing its register	red office or registered agent, or both,	
SIGNATU			D-1	
	Electronic Signature of Registered Agent		Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete SIVERA, FAYE M 3335 SW 181ST TERR. MIRAMAR, FL 33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete ROBINSON, DAVID R 19121 NW 6TH CT. MIAMI, FL 33169	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Delete TAYLOR, HENNIETTA 1497 NW 1SST OPA LOCKA, FL 33054	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete RICHARD, BECKFORD 1269 NW 123 TERR PEMBROKE, FL 33026	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete BECKFORD, RICHARD 1269 N.W 123 TERR PEMBROKE, FL 33026	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete CLEMETSON, DAVID 4168 INVERRARY DR BLDG APT 112 FORT LAUDERDALE, FL 33316	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FAYE M. SILVERA PD 04/01/2004