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NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # N98000002957

1. Corporation Name

CHRISTIAN COMMUNITY MINISTRY JESUS THE FOUNTAIN OF THE LIFE, INC.

Principal Place of Business
 17070 COLLINS AVE T264
 MIAMI BEACH FL 33160

Mailing Address
 17070 COLLINS AVE T264
 MIAMI BEACH FL 33160



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		05/22/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		04-3406377	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24		29		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

DO CARMO, JEFFERSON F
 17070 COLLINS AVE T264
 MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81	Name	85	Zip Code
82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	FL	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE SOUSA, CESAR AUGUSTO M	1.2 NAME	
STREET ADDRESS	AV 5 RADIAL QD 216 LT 4B SECTOR	1.3 STREET ADDRESS	
CITY-ST-ZIP	PEDRO LUDOVICO-GOIANIABRASIL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DO CARMO, JEFFERSON F	2.2 NAME	
STREET ADDRESS	30 HAMILTON ST. #14	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAUGUS MA 01906	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DE OLIVEIRA, OVIDIO P	3.2 NAME	SD
STREET ADDRESS	7601 EAST TREASURE DR #1105	3.3 STREET ADDRESS	FERNANDES, Heles A.P.
CITY-ST-ZIP	N BAY VILLAGE FL 33141	3.4 CITY-ST-ZIP	650 SPARK RD # 528
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DO NASCIMENTO, JESIEL J	4.2 NAME	
STREET ADDRESS	7601 EAST TREASURE DR #1105	4.3 STREET ADDRESS	
CITY-ST-ZIP	N BAY VILLAGE FL 33141	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

02-25-99 (854) 9643120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)