FILE NOW: FILING FEE IS $61.25

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Feb 25, 1999 8:00 am
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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N98000004088

1. Corporation Name
W.J.N. Economic Development INC.

Principal Place of Business	Mailing Address
Peaceful M.B. Church INC.	W.J.N. Economic Development, INC.
2230 Alibaba Ave.	2230 ALI BABA Ave.
Opa Locka Fla. 33054	Opa Locka Fla. 33054

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 2230 Alibaba Ave.	26 2230 ALI BABA Ave	July 13, 1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0846216 ☐ Applied For ☐ Not Applicable
City & State 23 Opa-Locka FL, Dade	City & State 28 Opa Locka, Fla.	5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
Zip 24 33054 County 25 Dade	Zip 29 33054 Country 30 Dade	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

Rev, Willie J. Nelson
3770 N.W. 199 St.
Carol City, Fla. 33055

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: Rev, Willie J. Nelson
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	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Howell, ANNette		1.2 NAME		
STREET ADDRESS	2230 Ali BABA Ave		1.3 STREET ADDRESS		
CITY-ST-ZIP	Opa Locka Fla. 33054		1.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	Nelson, Harriet		2.2 NAME		
STREET ADDRESS	2230 Ali BABA Ave		2.3 STREET ADDRESS		
CITY-ST-ZIP	Opa-Locka. Fla. 33054		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	Nelson Willie J Rev.		3.2 NAME		
STREET ADDRESS	2230 Alibaba. Ave.		3.3 STREET ADDRESS		
CITY-ST-ZIP	Opa-Locka Fla 33054		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	TD	☐ Change ☑ Addition
NAME			4.2 NAME	Sophia C. Nelson	
STREET ADDRESS			4.3 STREET ADDRESS	2230 Alibaba Ave	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Opa Locka Fla 33054	
TITLE		☐ DELETE	5.1 TITLE	TD	☐ Change ☑ Addition
NAME			5.2 NAME	Brown, Loretha	
STREET ADDRESS			5.3 STREET ADDRESS	2230 Alibaba Ave	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Opa Locka Fla. 33055	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

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 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: Rev, Willie J. Nelson (305) 625-0898
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #