2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08377

Entity Name: MIAMI REVIVAL TABERNACLE ASSEMBLY OF GOD, INC.

FILED
Jan 23, 2013
Secretary of State
CC8902497965

Current Principal Place of Business:

MIAMI REVIVAL TABERNACLE ASSEMBLY OF GOD 2085 NW 97TH STREET MIAMI, FL 33147

Current Mailing Address:

MIAMI REVIVAL TABERNACLE ASSEMBLY OF GOD 2085 NW 97TH STREET MIAMI, FL 33147

FEI Number: 59-2246098 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHAW, LEONARD 2085 NW 97TH STREET MIAMI, FL 33147 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LEONARD SHAW 01/23/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT - SENIOR PASTOR Title ELDER

Name SHAW, LEONARD Name BYER, MERVITA

Address MIAMI REVIVAL TABERNACLE Address 19410 NW 8TH STREET

ASSEMBLY OF GOD
2085 NW 97TH STREET
City-State-Zip: PEMBROKE PINES FL 33029

2085 NW 97TH STREET City-State-Zip: PEMBROKE PINES FL 33029

City-State-Zip: MIAMI FL 33147 Title TREASURER

Title VPBD - ELDER Name SEYMORE, RODERICK E

Name MONTGOMERY, ARNOLD R Address 16512 S.W. 18 STREET

Name MONTGOMERY, ARNOLD R Address 16512 S.W. 18 STREET

Address 17671 SW 31 COURT City-State-Zip: MIRAMAR FL 33027

City-State-Zip: MIRAMAR FL 33029 Title BD

Title BD Name COKE, KEITH

Name WRIGHT-JONES, SABRINA Address 19740 NW 4TH AVENUE

Address 14320 NW 12TH AVENUE City-State-Zip: MIAMI GARDENS FL 33169

City-State-Zip: MIAMI FL 33168 Title SECRETARY

Title ELDER Name MONTGOMERY, JENNIFER

Name TRESTRAIL, YVONNE Address 7070 SW 27TH STREET

Address 1753 NE 146 STREET City-State-Zip: MIRAMAR FL 33023

City-State-Zip: MIAMI FL 33181

I hereby 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 all other like empowered.

SIGNATURE: LEONARD SHAW PRESIDENT-SENIOR 01/23/2013 PASTOR