2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08377

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

FILED Feb 10, 2016 Secretary of State CC8067556118

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 02/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT - SENIOR PASTOR Title VPBD - ELDER

Name SHAW, LEONARD Name MONTGOMERY, ARNOLD R

Address MIAMI REVIVAL TABERNACLE Address 17671 SW 31 COURT

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

2085 NW 97TH STREET City-State-Zip: MIRAMAR FL 3302

City-State-Zip: MIAMI FL 33147 Title ASST. TREASURER

Title TREASURER Name WRIGHT-JONES, SABRINA

Name SEYMORE, RODERICK E Address 14320 NW 12TH AVENUE

Address 16512 S.W. 18 STREET City-State-Zip: MIAMI FL 33168

City-State-Zip: MIRAMAR FL 33027 Title SECRETARY

Title DEACON Name MONTGOMERY, JENNIFER
Name COKE, KEITH Address 7070 SW 27TH STREET

Address 19740 NW 4TH AVENUE City-State-Zip: MIRAMAR FL 33023

City-State-Zip: MIAMI GARDENS FL 33169 Title DEACONESS

Title BD, ELDER Name JOHNSON, ROSANNA

Name CANNON, ALBERT Address 761 GRAND CONCOURSE

Address 755 NE 145 STREET City-State-Zip: MIAMI FL 33138

City-State-Zip: MIAMI FL 33161 Continues on page 2

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 02/10/2016

Officer/Director Detail Continued:

Title DEACONESS Name TALLEY, JOY

Address 2973 SW 174 AVE
City-State-Zip: MIRAMAR FL 33029