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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 706408

1. Corporation Name

MIAMI BEACH FIRST BAPTIST CHURCH, INC.

Principal Place of Business

2816 SHERIDAN AVE
MIAMI BEACH FL 33140

Mailing Address

405 W 28TH ST
MIAMI BEACH FL 33140



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
11/13/1963

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-0651075

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PLOTKIN, MICHAEL
1020 6TH STREET, #4
MIAMI BEACH FL 33139

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C
NAME O'NEIL, HUGH
STREET ADDRESS 3515 SOUTHLAKE DRIVE
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE VCT
NAME PLOTKIN, CINDY
STREET ADDRESS 1020 6TH STREET, #4
CITY-ST-ZIP MIAMI BEACH FL ☐ DELETE

TITLE D
NAME BUTT, JAMES
STREET ADDRESS 465 OCEAN DRIVE #316
CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ DELETE

TITLE D
NAME PLOTKIN, MICHAEL
STREET ADDRESS 1020 6TH STREET, #4
CITY-ST-ZIP MIAMI BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DIRECTOR
NEIL BODIE
2655 COLLINS AVE. # 806
MIAMI BEACH, FL 33140

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)