2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 28, 2004 8:00 am Secretary of State **DOCUMENT # 712926** 04-05-2004 90082 017 ****70.00 1. Entity Name THE ROYAL ASSEMBLY OF JESUS CHRIST PENTECOSTAL, INC. Principal Place of Business Mailing Address **PUCULPUU** 8313 NW 22 AVE MIAMI FL 33147 US 460 W. 25TH PLACE HIALEAH FL 33010-1335 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For AP-PLIED FOR 4. FEI Number Not Applicable \$8.75 Additional Fee Required Zio Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name___ WILES, RALPHIF: -Street Address (P.O. Box Number is Not Acceptable) 201 E. 2ND STREET HIALEAH FL 33010 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE □ Delete TITE F Change ☐ Addition JOHNSON, JERIA NAME Z NAME 18735 N.W. 32ND PLACE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-7/P CITY-ST-ZIP TITLE Delete TITLE Change Change ☐ Addition FLAG, MYRA NAME 3314 NW 13TH AVE STREET ADDRESS STREET ADDRESS MIAM) FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HOUSTON, VIRGINIA NAME NAME 460 W-25TH PLACE STREET ADDRESS STREET ADORESS HIALEAH FL CITY-ST-ZIP CITY-ST-ZIP Delete nne ☐ Change = ☐ Addition JOHNSON, PATRICIA NAME NAME 18735 NW 32 PLACE STREET ADDRESS STREET ADDRESS MIAMLEL CITY-ST-7IP CITY-ST-ZIP MLE Delete ☐ Change Addition TITLE MEADOWS, DELORIS J NAME NAME 270 N.W. 191 ST. STREET ASIGNESS STREET ADORESS MIAMI FL 33169 CITY-ST-ZIP CITY-ST-ZIP. ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-57-7IP 12. 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 report or supplemental 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 10 or Block 11 if charged, or on an attachment with an address, with all other, like empowered.

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