FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717322

(2)

PENTECOSTAL APOSTOLIC FAITH TABERNACLE, INC.

<u> </u>		***************************************						
Principal Place 841 NW 70TH S MIAMI FL 3314	STREET	Mailing Address 9825 NW 13TH AVENUE MIAMI FL 33147-2605 US			4(2)211 B(611 2)211 2:211 \$			
		00			3. Date Incorporated or Qualified 10/10/1969	3a. Date of Last R 06/25/19		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	oplied For	1
21		26			59-2802474		ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	, , , ,	Additional equired	
City & State	e	City & State			6. Election Campaign Financing		May Be	
23] Zip	Country	28	Coun		Trust Fund Contribution		to Fees	1
21p Cooliny 24 25		29 30		iu y	8. This corporation has liability for in Florida Statutes	ntangible tøx under s Yes VINo	. 199.032,	
<u> </u>	9. Name and Address of Current		1301		10. Name and Address of New Reg			┨
			1	81 Name				1
ROBERT	SON, MARTINIECE		-	R2 Street Adv	dress (P.O. Box Number is Not Acceptable	0)		-
1646 SW 116TH AVENUE		82 Street Addi		00.S.W. 20 ** SF				
	OKE PINES, FL 33025		Ī	B3				1
	•		-	B4 City AA		es 7in	Code	4
				M	RAMAR.	- FLI 19ろ	Code 7	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statu	tes, the ab	ove-named cor	rporation submits this statement for the pration's board of directors. I hereby accep	rpose of changing I	ts registered	1
agent. I a	m familiar with, and accept the obligation	tions of, Section 617.0503, Fi	orida Statu	tes.	ation's board of directors, Thereby accep	tine appointment as	registered	1
SIGNATURE .								
12,	Signature, typed or printed name of registered agen OFFICERS AND		TE Registered	Agent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DC IN 10	4
TITLE	PD OFFICERS AND	DELETE	1.1 TITL	F	ADDITIONS/CHANGES TO OFFIC	Change	Addition	∤ §
NAME	JORDAN, VERLINE S.		1.2 NAM			Ontaingo	recition	160
STREET ADDRESS	1460 N W 138TH STREET			EET ADDRESS				8
CITY-ST-ZIP	MIAMI FL			r-St-ZIP				CR2E037 (9/96)
TITLE	SD	☐ DELETE	2 1 TITL		***************************************	☐ Change	Addition	ᄬ
NAME	ROBERTSON, MARTINIECE		2.2 NAA	AE				
STREET ADDRESS	1646 S W 116TH AVENUE		2.3 STA	EET ADDRESS				1
CITY - ST - ZIP	PEMBROKE PINES FL		2. 4 CIT	Y-ST-ZIP				_[
TITLE	ΤD	☐ DELETE	3.1 TITL	.E		Change	Addition]
NAME	HOWARD, DIANE		3.2 NA	AE .				
STREET ADDRESS	2760 NW 211TH STREET		3.3 STR	EET ADDRESS				
CITY-ST-ZIP	MIAMI FL	Decemen		Y-ST-ZIP			1 4 4 4 9 5	1
THTLE		☐ DELETE	4.1 TITL	-		☐ Change	☐ Addition	
NAME Street address			4.2 NA	 				
				EET ADDRESS				
CITY - ST - ZIP TITLE		DELETÉ	5.1 TITU	r-ST-ZIP		Change	Addition	┨
NAME			5.2 NAM			Change		
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				r-ST-ZIP				
TITLE		DELETE	6.1 TITL			Change	Addition	1
NAME			6.2 NAA	AE		-		
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				r-st-zip				
14. I do hereb	by certify that the information supplied	with this filing does not qual	ify for the e	xemotion state	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same legal	I further certify that	the	1
I am an o	fficer or director of the corporation or the	the receiver or trustee empoy	wered to ex	cecute this repo	at my signature shall have the same legal ort as required by Chapter 617, Florida Si	atutes; and that my r	udi dairi; ina name	1