

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

AMENDED
FILED

00 MAY 31 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717830

Corporation Name
Apostolic Miracle Temple of New Jerusalem, Inc.

Principal Place of Business

Mailing Address

2939 NW 46 Street
Miami, Florida 33142

(SAME)

300003265513--3
-05/24/00--01001--024
*****61.25 *****61.25

Principal Place of Business 2939 NW 46 Street Suite, Apt. #, etc.		2a. Mailing Address 26. SAME Suite, Apt. #, etc.		3. Date Incorporated or Qualified	
City & State Miami, Florida		27. City & State		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip 33142		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25.		29.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

81. Name	Theadio Dinson
82. Street Address (P.O. Box Number is Not Acceptable)	14330 NW 21 Court
83.	
84. City	Miami
85. Zip Code	FL 33054

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 617.0505, Florida Statutes.

SIGNATURE: <u>Annie E. Brown</u> Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE																						
OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																							
<table border="1"> <tr> <td>TITLE</td> <td>President</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Theadio Dinson</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	President	<input type="checkbox"/> DELETE	STREET ADDRESS	Theadio Dinson		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>1.1 TITLE</td> <td>Director</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>Marie Akridge</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>2939 NW 46 Street</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td>Miami, Florida 33142</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			1.1 TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME	Marie Akridge		1.3 STREET ADDRESS	2939 NW 46 Street		1.4 CITY-ST-ZIP	Miami, Florida 33142	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	President	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Theadio Dinson																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
1.1 TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
1.2 NAME	Marie Akridge																									
1.3 STREET ADDRESS	2939 NW 46 Street																									
1.4 CITY-ST-ZIP	Miami, Florida 33142	<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
<table border="1"> <tr> <td>TITLE</td> <td>Vice-President</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Dora Williams</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	Vice-President	<input type="checkbox"/> DELETE	STREET ADDRESS	Dora Williams		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>2.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>2.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME			2.3 STREET ADDRESS			2.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	Vice-President	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Dora Williams																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
2.2 NAME																										
2.3 STREET ADDRESS																										
2.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
<table border="1"> <tr> <td>TITLE</td> <td>Secretary</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Annie E. Brown</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	Secretary	<input type="checkbox"/> DELETE	STREET ADDRESS	Annie E. Brown		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>3.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>3.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME			3.3 STREET ADDRESS			3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	Secretary	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Annie E. Brown																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
3.2 NAME																										
3.3 STREET ADDRESS																										
3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
<table border="1"> <tr> <td>TITLE</td> <td>Treasurer</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Dora Williams</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	Treasurer	<input type="checkbox"/> DELETE	STREET ADDRESS	Dora Williams		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>4.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME			4.3 STREET ADDRESS			4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	Treasurer	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Dora Williams																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
4.2 NAME																										
4.3 STREET ADDRESS																										
4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
<table border="1"> <tr> <td>TITLE</td> <td>Director</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Feddie Mae Davis</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	Director	<input type="checkbox"/> DELETE	STREET ADDRESS	Feddie Mae Davis		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>5.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME			5.3 STREET ADDRESS			5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	Director	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Feddie Mae Davis																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
5.2 NAME																										
5.3 STREET ADDRESS																										
5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
<table border="1"> <tr> <td>TITLE</td> <td>Director</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Merlene Dinson</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2939 NW 46 Street Miami, Florida 33142</td> <td></td> </tr> </table>			TITLE	Director	<input type="checkbox"/> DELETE	STREET ADDRESS	Merlene Dinson		CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142		<table border="1"> <tr> <td>6.1 TITLE</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>			6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME			6.3 STREET ADDRESS			6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	Director	<input type="checkbox"/> DELETE																								
STREET ADDRESS	Merlene Dinson																									
CITY-ST-ZIP	2939 NW 46 Street Miami, Florida 33142																									
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								
6.2 NAME																										
6.3 STREET ADDRESS																										
6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																								

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: Annie E. Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #