

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

FILED
Jun 01, 2004 8:00 am
Secretary of State

06-01-2004 90006 005 ****61.25

DOCUMENT # 732767
 1. Entity Name
 KAZAH TEMPLE #149 OF MIAMI, FLORIDA -- A. E. A. O. N. M. S. OF N. AND S. AMERICA AND ITS.



Principal Place of Business Mailing Address
 .17700 NW 14 COURT MIAMI FL 33055

54056146



MOORE CR2E037 (11/03)

2. Principal Place of Business
 KAZAH #149
 Suite, Apt. #, etc. 500 Fisherman ST.

3. Mailing Address
 P.O. Box 2515
 Suite, Apt. #, etc.

City & State
 Coral City

City & State
 FL

4. FEI Number
 59-6544122

Applied For
 Not Applicable

Zip
 33055

Country
 America

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ELLIS, JOSEPH
 2290 NW 107TH ST
 MIAMI FL 33169

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL 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) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P	NAME BRYANT, FREDERICK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 17700 NW 14TH COURT	CITY-ST-ZIP MIAMI FL 33055	
TITLE V	NAME SANDERS, RODNEY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 17700 NW 14TH COURT	CITY-ST-ZIP MIAMI FL 33055	
TITLE SD	NAME WORTHY, THEODIS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 17700 NW 14 COURT	CITY-ST-ZIP MIAMI FL 33055	
TITLE D	NAME MORRISON, EUGENE	<input type="checkbox"/> Delete
STREET ADDRESS 17700 NW 14 COURT	CITY-ST-ZIP MIAMI FL 33055	
TITLE DT	NAME HILL, CHARLES	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 19710 SW 119TH AVE	CITY-ST-ZIP MIAMI FL 33177	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P	NAME Sanders, Rodney	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS PO Box 54-6404	CITY-ST-ZIP Surfside, FL 33154	
TITLE V	NAME Gordon, MS Arthur	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4610 S.W. 27th St	CITY-ST-ZIP Hollywood, FL 33023	
TITLE SD	NAME WALKER, KENNETH	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 20840 NW 17th Ave Apt #130	CITY-ST-ZIP Coral City FL 33057	
TITLE D	NAME Worthy, Theodis D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 17700 NW 14th Ct	CITY-ST-ZIP MIAMI FLA 33169	
TITLE DT	NAME Rodriguez, Steve	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 19320 Whispering Pines Road	CITY-ST-ZIP Miami FL 33157	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth Walker **KENNETH WALKER** 5-26-2004 305-514-3421
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #