

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 733291 (9)

1. Corporation Name

MIRACLE REVIVAL FELLOWSHIP OF SOUTH FLORIDA, INC

Principal Place of Business

Mailing Address

2090 SERVICE ROAD  
OPA-LOCKA FL 33054

2090 SERVICE ROAD  
OPA-LOCKA FL 33054

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COBBS, ERNEST  
1020 S.W. 96TH AV  
MIRAMAR FL 33025-3673

81 Name

Ernest L. Cobbs

82 Street Address (P.O. Box Number is Not Acceptable)

2090 Service Road

83

84 City

Opa Locka

FL

85 Zip Code

33054

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME COBBS, ERNEST  
STREET ADDRESS 1020 SW 96 AVE  
CITY-ST-ZIP MIRAMAR FL 33025

TITLE ST  
NAME JARRETT, CHRIS  
STREET ADDRESS 1800 SOUTH GLADES DR  
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162

TITLE D  
NAME CONLEY, LENORIA  
STREET ADDRESS 2090 SERVICE ROAD  
CITY-ST-ZIP OPA-LOCKA FL

TITLE D  
NAME ALBURY, JAMES  
STREET ADDRESS 2301 N.W. 95 ST  
CITY-ST-ZIP MIAMI FL 33147

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

400002672914--1  
-10/26/98--01116--012  
\*\*\*\*131.25 \*\*\*\*131.25

Jarrett Chris  
2090 Service Road  
Opa Locka FL 33054

Leronie N. Grant  
8430 E. Dixie Highway  
Miami FL 33138

4/15/98

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.

SIGNATURE:

Ernest L. Cobbs

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 6224684

APPROVED  
AND  
FILED

98 OCT 21 PM 2:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



3. Date Incorporated or Qualified

07/14/1975

4. FEI Number

59-1672944 59-1672994

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

CR2E037 (10/97)