NC COF ANNU	Katheri Secreta	\$61.25 IDA DEPARTMENT OF STATE Katherine Harris Secretary of State ISION OF CORPORATIONS			FILED May 08, 1999 8:00 am Secretary of State 05-08-1999 90009 046 ****61.25					
1. Corporatio	MENT # 736552 Name ABERNACLE OF JESUS CH		INC.							
Principal Place of Business 7424 N.E. 2ND AVE. MIAMI FL 33138			Mailing Address 7424 N.E. 2ND AVE. MIAMI FL 33138							
2. Principal Place of Business			2a. Mailing Address 26				3. Date Incorporated or Qualifed 08/06/1976			
21 Suite, Apt.	#, etc.		Suite, Apt. #, etc.				4. FEI Number 65-0450827	Applied For		
22 City & State			City & State					Not Applicable \$8.75 Additional		
23	Country	28	8 Zip Cour			·	5Certifcate of Status Desired 6. Election Campaign Financing	Fee Required		-
24	25	29		30			Trust Fund Contribution	Added to		
	9. Name and Address of Curre	nt Regis	tered Agent		81	Name	10. Name and Address of New Registere	d Agent		ļ
Rogers, Edward M 1401 N.W. 17Th Ave. Miami Fl. 33125				83			ress (P.O. Box Number is Not Acceptable)	85 Zip C	Code	
					84	City	F			
office or a	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the obliga	of Florid	ia. Such change was a	uthorized	bv t	he corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as rec	jistered	
SIGNATURE						signature requin	ed when reinstating} DATE			
12.	OFFICERS A		CTORS	13.			ADDITIONS/CHANGES TO OFFICERS			(11/98)
TTTLE NAME	PDT St. Vil, Jean Prosper		DELETE		1.1 TITLE			Change	Addition	
	51 N.W. 51ST STREET					ADDRESS				2E037
CITY+ST-ZIP TITLE	MIAMI 33127			1.4 CTT DELETE 2.1 TM		-ZIP		Change	Addition	8
NAME	ST. VIL, JEREMIE			2.2 NAME						ļ
STREET ADDRESS	51 N.W. 51ST STREET MIAMI 33127			2.3 STRE 2.4 CITY		ADDRESS				
CITY-ST-ZIP TITLE	STD			3.1 TITLE		-211-		Change	Addition	1
NAME STREET ADDRESS	ALTIDORE, MARIE ERMANISE 197 N.W 88TH STREET			3.2 NAME 3.3 STREE						Ì
CITY-ST-ZIP	MIAMI FL 33150			3.4. CITY						
TITLE NAME				4.1 TITLE 4.2 NAME				(Change	Addition	
STREET ADDRESS	. ·					ADDRESS				
CITY-ST-ZIP TITLE	·	· -		4.4 CITY 5.1 TITL		-ZIP		Change	Addition	
NAME				5.2 NAME					_	
STREET ADDRESS				5.3 STREE 5.4 CITY-S						
CITY-ST-ZIP TITLE				6.1 TITLE				Change	Addition	1
NAME				6.2 NAM 6.3 STRI		ADDRESS				[
STREET ADDRESS				6.4 C	ITY-ST	-ZIP				ĺ
14. I hereby	on this annual report or supplements	al annuai	I report is true and accu	urate and	i that	my signatur	Section 119.07(3)(i), Florida Statutes. I further or re shall have the same legal effect as if made un ind by Chapter 517. Elorida Statutes and that	nder oath: that i	aman	
officer or Block 12	director of the corporation or the rec or Block 13 if changed, or on an atta	chment	with an address, with a	ll other lik	nis re (e en	pon as requipowered.	Jired by Chapter 617, Florida Statutes; and that	my name appe	nga 167 161	
SIGNAT			URE REQ)	5-2-99 (30 Date	5) 754- Daytime Phone #	-3101	