NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS



1. Corporation							-		
JESUS S	SUPERNATURAL DELIVERA	NCE CHUI	RCH, INC.						
Principal Place	e of Business	Mailing	Address				·		
700 NW 21ST AVENUE		1524 NW 2ND STREET							
POMPANO BÉ Us	ACH FL 33069-2439	POMPAN US	IO BEACH FL 33	1069-2439					LEH DANK HEGI
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	· · · · · · · · · · · · · · · · · · ·	10-11-9					3. Date Incorporated or Qualifed		
	lace of Business	2a. Maili 26	ing Address				09/07/1977		
21 Suite, Apt.	#. etc.		, Apt. #, etc.				4. FEI Number	A	polled For
22		27		- -		• •	. 59-1776103		ot Applicable
City & Stat	e:		& State		_		5. Certificate of Status Desired —		Additional equired
23	Country	28 Zip	······································	Cou	intry		Election Campaign Financing		May Be
Zip 24	25 Country	29		30			Trust Fund Contribution		to Fees
45	9. Name and Address of Curre		Agent				10. Name and Address of New Register	ed Agent	
					81	Name	,	•	1
DAVIS, HE	ERBERT	•			82 3	Street Addr	ess (P.O. Box Number is Not Acceptable)		,
	. 2ND STREET				<u> </u>				
POMPANO	D BEACH FL 33069			•	83		<u></u>	·	
	•				84 (City	F	85 Zip	Code
	· .						В	•	
94 Characters	to the provisions of Sections 617 050	02 and 617 15	08 Florida Stati	utes, the a	bove-n	named corp	oration submits this statement for the purpose	of changing its	s registered
11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State	02 and 617.15 of Florida. Su	08, Florida Stati ch change was	utes, the a authorized	ibove-n d by the	named corporation	oration submits this statement for the purpose on's board of directors, I hereby accept the ap	of changing its pointment as re	registered egistered
	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the obligations.	02 and 617.15 of Florida. Su ations of, Sect	08, Fiorida Statu ch change was ion 617,0503, Fi	utes, the a authorized lorida Stat	bove-n by the utes.	named corp e corporatio	oration submits this statement for the purpose on's board of directors, I hereby accept the ap	of changing its pointment as re	registered egistered
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SIGNATURE	Signature, typed or printed name of registered equ OFFICERS Al		NOT	E: Registered	Agent pl	Ignatura required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
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14. I hereby certify that the information supplied with this filing does not qual indicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, of on an attachment with an address, we qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shell have the same legal effect as if made under cett; that I am an evered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

HERBERT DAVIS APRIL 8,1999