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NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

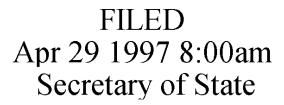
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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BETHEL APOSTOLIC TEMPLE





Principal Place of Business				Mailing Address					1 (90111 1001) \$1000 (1101 1101) 0510) 1511 0101 01013 01011 01011 01011				
1855 NORTHWEST 119 STREET MIAMI FL 33167				1855 NORTHWEST 119 STREET MIAMI FL 33167-2715									
									3. Date Incorporated or Qualified 06/02/1978		e of Las 14/15/	st Report 1996	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number 59-1367782			Applied For	
21				26 Suite And H ato					39-1307762		A 0 7	Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired				
City & State	e			City & S	State				6. Election Campaign Financing			00 May Be	
23				28					Trust Fund Contribution	Added to Fees			
Zip		Country		Zιρ		Cot	intry		B. This corporation has liability for			er s. 199.032,	
24		25	29			30	···			Yes [•		
<u> </u>	9, Name	and Address of Curre	nt Regi	stered Ag	jent		81	Name	10. Name and Address of New Re	gistered A	gent		
HAAA	MOLIAR												
	MICHAEL /. 178TH TI	FRR		82 Street Ad			Street Ad	dress (P.O. Box Number is Not Acceptab	ile)				
MIAMI F		L1 11 1.					83			-			
11114 41711	- 00100						0.4	0:1	<u> </u>		T=-T -	7 - 0 - 1	
							84	City		FL	85 Z	Zip Code	
11. Pursuant office or ragent. I a	to the provis registered ag am familiar w	sions of Sections 617.05 gent, or both, in the Stat ith, and accept the oblig	02 and i e of Flor gations o	617.1508, ida. Such of, Section	Florida Stati change was 617.0503, F	utes, the a sauthorize forida Sta	bove d by tutes	e-named co the corpor is	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of of the appo	changin intment	ig its registered as registered	
SIGNATURE .													
40	Signature, typed	or printed name of registered as OFFICERS Aft			n (NC		d Age	nt signature req	aured when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	NIDEOI	ICATIO IN 10	
12. TiTLE	PD	OFFICERS AF	ALI DINE		DELETE	13. 1.1 T	ITL F	Г	ADDITIONS/CHANGES TO OFFIC		Chan		
NAME		MICHAEL		•		1.2 N			•			g	
STREET ADDRESS		V. 178TH TERRACE						ADDRESS					
CITY-ST-ZIP	MIAMI F					1.4 C	(TY-S	T-7IP	•				
TITLE	D				DELETE	211	ITLE				Chan	ge Addition	
NAME		OSWALD				5 5 M	AME						
STREET ADDRESS		ALINAS WAY				235	TREE1	ADDRESS					
CITY-ST-ZIP	MIRAMA	IR FL			DELETE			S1 - Z(P			Chan	on [] taldising	
TITLE NAME	D	N, WILLIE			L DELETE	311					Chan	ge 🔲 Addition	
STREET ADDRESS		LL POND DRIVE				32 N		ADDRESS					
CITY-ST-ZIP	MIRAMA							ST - ZIP					
TITLE	17.0.4 4.0.				DELETE	417		/ 			Chan	ge Addition	
NAME						4.21	IAME	i					
STREET ADDRESS						4.3 S	TREFT	ADDRESS					
CITY-ST-ZIP	ļ						ITY-S	1-ZIP					
TITLE				Į	DELETE	5.1 T					Chan	ge 🔲 Addition	
NAME						5.2 N							
STREET ADDRESS	1							ADDRESS					
CITY-ST-ZIP TITLE	 				DELETE	5.4 C	ITLE	1-ZIP			Chan	ge Addition	
NAME	1				Mrr.	6.2 N						An T WOOMON	
STREET ADDRESS	1							ADDRESS					
CITY-ST-ZIP							INCE I						
	by portify the	d the information e-moli	and mitted	thin dilina a	duon not our				ad in Castina 110 07/0/// Elecida Ctatuta			Lat No.	

Information indicated on this annual report or supplemental annual report is true and accurate and I am an officer or director of the corporation or the receiver or trustee empowered to execute this appears in Block 12 or Block 13 if changed, or on an attachment with an address.

signature shall have the same logal effect as if made under eath; that required by chapter 617, Florida Statutes; and that my name