

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 750819

FILED  
Aug 25, 2002  
Secretary of State

**Entity Name:** INTERNATIONAL PENTECOSTAL CITY MISSION PRAYER CENTER OF FLORIDA, INC.

**Current Principal Place of Business:**

3033 NW 7 AVENUE  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

913 NW 29 TERR  
MIAMI, FL 33127 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SMELLIE, REVEREND ENID A.  
913 NORTHWEST 29TH TERRACE  
MIAMI, FL 33127

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WALTERS, BSHP.DELROS, E L.  
Address: 913 N.W. 29TH TERRACE  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: JONES,BISHOP BALZILL, A E.  
Address: 913 N.W. 29TH TERRACE  
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete  
Name: DORSEY,BISHOP ODELIN, E W.  
Address: 913 N.W. 29TH TERRACE  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: SMELLIE, REV. ENID A.  
Address: 913 N.W. 29TH TERRACE  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: SMELLIE, REV. ENID A, .  
Address: 913 N.W. 29TH TERRACE  
City-St-Zip: MIAMI, FL

Title: SD (X) Change ( ) Addition  
Name: JACKSON, EVELYN,  
Address: 3033 NW 7 AVENUE  
City-St-Zip: MIAMI, FL

Title: TD (X) Change ( ) Addition  
Name: BROOKS, MAVIS  
Address: 19368 NW 29 PLACE  
City-St-Zip: MIAMI, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ENID SMELLIE

VD

08/25/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date