## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 762446

(3)

GOSPEL MIRACLE FAITH SOUL INSPIRATOR KNOWN AS THE MILLION DOLLAR PLAN INC.

	порагласе	Di Busilless		IV.	Mailing Address								
5417 NW 24TH AV MIAMI FL 33142					5417 NW 24TH AV MIAMI FL 33142								
										3. Date Incorporated or Qualific 03/17/1982	ed 3a. Da		ast Report <b>/1995</b>
	Principal Pla	ace of Busine	ess	<b>→</b>	. Mailing Address	\$				4. FEI Number 42-3320981	· · · · · · · · · · · · · · · · · · ·	T	Applied For
21	0 3. 4		<del></del>	26						42 0020001			Not Applicable
22	Suite, Apt.	#, etc.		27	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	status Desired				
23	City & State	9		28	City & State					Election Campaign Financin     Trust Fund Contribution	g 🗆		.00 May Be ided to Fees
_	Zip	Country Zip Co 25 29 30				Country	/		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24		o Name	and Address of C		tered Agent	30				10. Name and Address of Ne			
$\overline{}$		<b>3</b> , 1101110	dita Addicas of C	on on nega	stered Agent		81	Na	me	TO, Mario and Address of No	n riegistered A	gon	
	DDIMEON	ו בו רשכי	eteo				"	'	PIIC				
		N, EL CHES					82	St	eet Add	iress (P.O. Box Number is Not Acce	otable)		
5417 N.W. 24 AVE. MIAMI FL 33142												· · · · ·	
	MIAMI FI	. 33142					83						
							84	Cit	У		FL	85	Zip Code
11	. Pursuant t	to the provisi	ons of Sections 617	0502 and 65	7 1508 Florida 9	Statutes the	above :	l name	ed corno	ration submits this statement for the	ournose of cha	naino i	ts registered office
	or redister	ed agent, or	both, in the State of	f Florida Suci	h change was au	thorized by	the corp	oratio	on's boa	ard of directors. I hereby accept the	appointment as	registe	red agent. I am
	tamiliar wi	in, and acce	pt the obligations of	, Section 617	.0503, Florida Sta	atutes.							
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305/633375/

R2E037 (12/95)