2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005
Secretary of State

DOCUMENT# N00000005182

Entity Name: FREEDOM TEMPLE OF MIAMI, INC.

Current Principal Place of Business:

5240 N.W. 7TH AVENUE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

1780 N.W. 194TH STREET
MIAMI, FL 33056

New Mailing Address:

FEI Number: 65-0997190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TELASCO, ANNE G ESQ.
7320 BISCAYNE BLVD.
MIAMI, FL 33138 US

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:	D	( ) Delete
Name:	MACKENS, WASHINGTON	
Address:	17842 S.W. 107TH AVE., #1	
City-St-Zip:	MIAMI, FL 33167	
Title:	D	( ) Delete
Name:	GERALD, EDDIE	
Address:	3150 MUNDY STREET	
City-St-Zip:	MIAMI, FL 33133	
Title:	D	( ) Delete
Name:	COX, BERNICE	
Address:	3030 N.W. 162ND STREET	
City-St-Zip:	MIAMI, FL 33054	
Title:	S	( ) Delete
Name:	MCMATH, DEVRA	
Address:	851 N.E. 155TH TERRACE	
City-St-Zip:	MIAMI, FL 33162	
Title:	TD	( ) Delete
Name:	REID, SIMONE	
Address:	20910 S.W. 81ST PLACE	
City-St-Zip:	MIAMI, FL 33189	
Title:	P	( ) Delete
Name:	SYMONETTE, RICARDO REV.	
Address:	1780 N.W. 194TH STREET	
City-St-Zip:	MIAMI, FL 33056	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: REV. RICARDO SYMONETTE P 03/14/2005

Electronic Signature of Signing Officer or Director — Date