

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005182

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** FREEDOM TEMPLE OF MIAMI, INC.

**Current Principal Place of Business:**

2519 NW 95 STREET  
MIAMI, FL 33147

**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  
Name: MACKENS, WASHINGTON  
Address: 17842 S.W. 107TH AVE., #1  
City-St-Zip: MIAMI, FL 33167

Title: D  
Name: JONES, JUSTIN  
Address: 12245 NW 8 AVE  
City-St-Zip: MIAMI, FL 33168

Title: D  
Name: COX, BERNICE  
Address: 3030 N.W. 162ND STREET  
City-St-Zip: MIAMI, FL 33054

Title: P  
Name: SYMONETTE, RICARDO REV.  
Address: 1780 N.W. 194TH STREET  
City-St-Zip: MIAMI, FL 33056

Title: D  
Name: SYMONETTE, OLGA F  
Address: 1780 N.W. 194 STREET  
City-St-Zip: MIAMI, FL 33056

Title: D  
Name: WELLS, SANDRA  
Address: 801 GEORGE ALLEN AVENUE  
City-St-Zip: MIAMI, FL 33133

I hereby 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 all other like empowered.

SIGNATURE: RICARDO SYMONETTE

P

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date