

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000144

FILED  
Jan 13, 2005  
Secretary of State

**Entity Name:** SOUTH FLORIDA INTERFAITH COMMITTEE FOR WORKER JUSTIC INC.

**Current Principal Place of Business:**

260 NE 17TH TERRACE  
STE 200  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

260 NE 17TH TERRACE STE 200  
MIAMI, FL 33132

**New Mailing Address:**

260 NE 17TH TERRACE  
STE 200  
MIAMI, FL 33132

**FEI Number:** 01-0701501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUFO, RAY  
ST. THOMAS UNIVERSITY  
15400 NW 32ND AVE  
MIAMI, FL 33050 US

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

BROWN, JIMMIE L REV.  
EBENEZER UNITED METHODIST CHURCH  
2001 NW 35 STREET  
MIAMI, FL 33142 US

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: REV. DR. JIMMIE L. BROWN

01/13/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DV ( ) Delete  
Name: GEORGES, JONAS REV  
Address: 16951 NE 4TH AVENUE  
City-St-Zip: MIAMI, FL 33162

Title: DST ( ) Delete  
Name: SCHIFF, SOLOMON  
Address: 4200 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 331373279

Title: DP ( ) Delete  
Name: RUFO, RAYMOND  
Address: 15400 NW 32ND AVE  
City-St-Zip: MIAMI, FL 330506498

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: DV (X) Change ( ) Addition  
Name: SCHIFF, SOLOMON RABBI  
Address: 4200 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33137

Title: DS (X) Change ( ) Addition  
Name: COX, JOHN FATHER  
Address: PO BOX 01-1901  
City-St-Zip: MIAMI, FL 33101

Title: DP (X) Change ( ) Addition  
Name: BROWN, JIMMIE L REV.  
Address: 2001 NW 35 STREET  
City-St-Zip: MIAMI, FL 33142

Title: DT ( ) Change (X) Addition  
Name: BURKE, MARTA REV.  
Address: 1900 NE 164 STREET  
City-St-Zip: MIAMI, FL 33162

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. DR. JIMMIE L. BROWN

DP

01/13/2005

Electronic Signature of Signing Officer or Director

Date