SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

1. Corporation Name

T.O.P. MINISTRIES, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

2a. Mailing Address

2150 MARTIN LUTHER KING AVENUE FT. LAUDERDALE FL 33311

2150 MARTIN LUTHER KING AVENUE FT. LAUDERDALE FL 33311

## **FILED** Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90025 048 \*\*\*\*61.25



3. Date Incorporated or Qualifed

03/23/1984

27   City & State   27   City & State   27   City & State   28   28   28   28   29   29   29   29	411						l. FEI Number			olied For	
City & State    City & State		#, etc.	Suite, Apt. #, etc.			1			<u> </u>		
22   22   23   30   30   5. Gerication Company   5. Gerication of Statutus Desired   5. Gerication Campaign Financing   5.5.00 May Be Addison of Statutes   5.00 May Be Addison   5.00 May Be						<del></del>					
Zip   Country   Zip   Country   Zip   Country   E. Election Campaign Financing   S. 5.00 May Be   Added to Fees	1 ·	<b>7</b>	<del> </del>				5. Certifcate of Status Desired	Ш	•		
25   28   38   Trust Fund Contribution		Country		Coun	try		5. Election Campaign Financing		\$5.00	May Be	
S. Name and Address of Current Registered Agent	— ·	25	29	30					Added to	o Fees	
ELLIS, SAMUEL G 2121 NW 47TH AVENUE LAUDERHILL FL 33313  B4 City  FL B5 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0502 finds Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.050.7 finds Statutes.  SIGNATURE  SIGNATURE  DP  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DP  SIGNATURE  DP  SIGNATURE  DP  SIGNATURE  DP  SIGNATURE  DP  SIGNATURE  DP  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DP  SIGNATURE			Registered Agent			10	Name and Address of New R	egistered A	gent		
2121 NW 47TH AVENUE LAUDERHILL FL 33313  84 City  FL 95 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. a man familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DP OBLETE  11. TITLE  DP OBLETE  11. SAMUEL G.  2121 NW 47 AVENUE  12. SAMUEL G.  2121 NW 47 AVENUE  12. TITLE  LAUDERHILL FL 33313  12. LAUDERHILL FL 33313  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change  Addition  WE ELLIS, SAMUEL G.  2121 NW 47 AVENUE  12. TITLE  VD  NME  ELLIS, CAROLYN  2121 NW. 47TH AVENUE  22. STREET ADDRESS  CITY-51-2P  TITLE  STD  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change  Addition  Addition  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DP  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DR D											
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Sa	•				52 Street Address (1.0. Box Humber to Het Address)						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I maintain with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP  SILLIS, SAMUEL G.  STREET ADDRESS  12. I MW 47 AVENUE  LAUDERHILL FL 33313  1.3 CITY-51.2P  LAUDERHILL FL 33313  2.2 AGTY-51.2P  LAUDERHILL FL 33313  2.2 AGTY-51.2P  TITLE  D CLARK, SHARON  3.2 NAME  STREET ADDRESS  3.160 HOUSTON STREET  CITY-51.2P  TITLE  D D DELETE  1.3 TITLE  D CLARK, SHARON  3.3 STREET ADDRESS  3.160 HOUSTON STREET  CITY-51.2P  TITLE  D D DELETE  3.3 STREET ADDRESS  3.4 CITY-51.2P  FT. LAUDERDALE FL 33313  4.2 CITY-51.2P  FT. LAUDERDALE FL 33313  4.2 CITY-51.2P  TITLE  D Change Addition  Addition  ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS CHANGES											
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12.	=	m lamiliai with, and accept the obligati	JOHN 01, DECUDIT 017.0505, FIGH								
12. OFFICERS AND DIRECTORS  TITLE  DP  DELETE  DELETE  1.1TITLE  DP  DATE  DAT	SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered A	vgent signature i	required when					
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CITY-ST-ZIP  LAUDERHILL FL 33313  54 CITY-ST-ZIP  Change Addition  61 TITLE  61 TITLE  62 NAME  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  LAUDERDALE LAKES FL 33319  64 CITY-ST-ZIP  AUDERDALE LAKES FL 33319  64 CITY-ST-ZIP  AUDERDALE LAKES FL 33319  65 CITY-ST-ZIP  AUDERDALE LAKES FL 33319  66 CITY-ST-ZIP  Comparison sumplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	i j	·		5.3 STT	REET ADDRESS	1					
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14. I hereby certify that the information sumplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information				6.4 CIT	Y-ST-ZIP						
14. I hereby county that the shorthard supplies and that my connecture shall have the same legal effect as if made under gath; that I am an	14.   hereby c	certify that the information supplied with	th this filing does not qualify for	the exer	notion state	d in Secti	on 119.07(3)(i), Florida Statutes.	further cert	ify that the ir	nformation	

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, with all other life empowered.