## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005384

FILED Apr 14, 2009 Secretary of State

Entity Name: REVELATION 3:20, MISSIONARY MINISTRY AND BIBLICAL TEACHINGS, INC.

Current Principal Place of Business: New Principal Place of Business:

10678 SW 186TH STREET MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

10678 SW 186TH STREET MIAMI, FL 33157

FEI Number: 34-1998319 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MONTAS, NARCISO H 10678 SW 186TH STREET MIAMI, FL 33157 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 MONTAS, NARCISCO H T.H.M.
 Name:
 MONTAS, NARCISCO H T.H.M.

 Address:
 3386 NE 11TH DRIVE
 Address:
 10809 SW 225TH TERRACE

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 MIAMI, FL 33170

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition Name: MONTAS, LUZ D Name: MONTAS, LUZ D

Address: 3386 NE 11TH DRIVE Address: 10809 SW 225TH TERRACE

City-St-Zip: HOMESTEAD, FL 33170 City-St-Zip: MIAMI, FL 33170

Title: DT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DE JESUS, IRIS
 Name:

 Address:
 9117 NW 190 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33018
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NARCISO H MONTAS DP 04/14/2009