

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 05, 2006
Secretary of State**

DOCUMENT# N08377

Entity Name: MIAMI REVIVAL TABERNACLE ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

%SELWYN SCOTT
2085 NW 97TH STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

%SELWYN SCOTT
2085 NW 97TH STREET
MIAMI, FL 33147

New Mailing Address:

FEI Number: 59-2246098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCOTT, SELWYN
2085 NW 97TH STREET
MIAMI, FL US

Name and Address of New Registered Agent:

SCOTT, SELWYN
2085 NW 97TH STREET
MIAMI, FL 33147 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: _____ Date: 04/05/2006
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SELWYN, SCOTT,
Address: 1021 NW 200TH TERRACE
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: BLAIR, J.M.,
Address: 1100 NW 116 TERRACE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: COKE, KEITH
Address: 19740 N.W. 4TH AVE.
City-St-Zip: MIAMI, FL 33169

Title: D (X) Delete
Name: KNIGHT, LYDIA
Address: 2130 N.W. 86 TERRACE
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: SEYMORE, RODERICK
Address: 16512 S.W. 18 STREET
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SELWYN, SCOTT,
Address: 1021 NW 200TH TERRACE
City-St-Zip: MIAMI, FL 33147

Title: T/S (X) Change () Addition
Name: KNIGHT, LYDIA,
Address: 2130 NW 86TH TERRACE
City-St-Zip: MIAMI, FL 33147

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 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: SELWYN M. SCOTT PRES Date: 04/05/2006
Electronic Signature of Signing Officer or Director