

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2004 8:00 am
Secretary of State

08-26-2004 90001 045 ****70.00

DOCUMENT # N09065 1. Entity Name MARANATHA FAITH AND REVIVAL CHURCH, INC.	
---	---

Principal Place of Business 2656 S.W. 87TH AVE. MIAMI, FL 33165	Mailing Address 2656 S.W. 87TH AVE. MIAMI, FL 33165
---	---

DO NOT WRITE IN THIS SPACE

54069906



05182004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2531409	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, IRMA E.
2656 S.W. 87TH AVE.
MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, IRMA E 10440 SW 51 ST. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LUGO, HENRY 9244 SW 154 AVE. MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEREZ, MISAEL 10440 SW 51 STREET MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, VICENTE R 11007 SW 25TH ST MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Irma E. Perez Irma E. Perez 8/19/04 305-559-0000

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Daytime Phone #