

2007

CORPORATION ANNUAL REPORT

FILED

Feb 28, 2007 08:00 AM
Secretary of State

DOCUMENT # N11000004297

1. Entity Name

MIRACLES STILL HAPPEN CHURCH, INC.



Principal Place of Business

1406 NE 2 ST.
POMPANO BEACH, FL 33060

Mailing Address

P.O. BOX 593
DEERFIELD BEACH, FL 33441 US



02082007

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0531761

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OWENS, RAYMOND JR
340 SW 14TH STREET
DEERFIELD BEACH, FL 33441

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME OWENS, RAYMOND JR
STREET ADDRESS 340 SW 14TH STREET
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE TD
NAME OWENS, SHUMIE L
STREET ADDRESS 340 SW 14TH STREET
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE D
NAME GARNER, JAMES JR
STREET ADDRESS 4000 NW 4TH AVE
CITY-ST-ZIP LIGHTHOUSE POINT, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000650912
03/08/07-80032-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:

Raymond Owens Jr. RAYMOND OWENS JR 3/25/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #