

N120000004098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

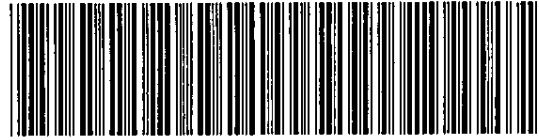
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800230068798

04/19/12--01024--013 **87.50

12 APR 19 AM 7:30
DIVISION OF CORPORATIONS
SECRETARY OF STATE

4/20
8

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Ann Abraham Ministries, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Ann Abraham Ministries, Inc.
Name (Printed or typed)

3173 Mundy Street
Address

Miami, Florida 33153-4351
City, State & Zip

305-441-8492
Daytime Telephone number

SabrinaThomas9966@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Ann Abraham Ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
3173 Mundy Street
Miami, Florida 33133-4351

Mailing address, if different is:
(same as principal) _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our mission is to spread the love and gospel of Jesus Christ by the preaching of the bible; humanitarian acts; and spiritual and emotional support. Thus preparing a people for the coming of the Lord Jesus Christ.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Nomination and votes by the members of the ministry.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ann Abraham, Pastor
Address: 3173 Mundy Street
Miami, Florida 33133

Name and Title: Sabrina Thomas
Address: 2335 NW 84th Street
Miami, Florida 33147

Name and Title: Mr. Antonio Jaminson
Address: 3454 Day Avenue
Miami, Florida 33133

Name and Title: _____
Address: _____

Name and Title: Michelle Green
Address: 241 NW 82nd Terrace
Miami, Florida 33150

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Robert Abraham, Elder
Address: 3173 Mundy Street
Coconut Grove, Florida

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sabrina Thomas
Address: 2335 NW 84th Street
Miami, Florida 33147

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Robert Abraham

Required Signature of Registered Agent

04-15-2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sabrina Thomas

Required Signature of Incorporator

04-15-2012
Date

Sabrina Thomas

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 APR 19 AM 7:50