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Feb 18 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N26937** (5)

1. Corporation Name

**MISHKAN T'HILLAH (TABERNACLE OF PRAISE) WORSHIP
CENTER, INC.**

Principal Place of Business

**2820 N.W. 167TH TERRACE
MIAMI FL 33056
US**

Mailing Address

**2820 N.W. 167TH TERR.
MIAMI FL 33056-4430
US**



3. Date Incorporated or Qualified
06/14/1988

3a. Date of Last Report
02/02/1996

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip Country

24 **25**

2a. Mailing Address

26
Suite, Apt. #, etc.

27
City & State

28
Zip Country

29 **30**

4. FEI Number
65-0102818

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARBIN, WILBUR T., SR.
3316 ONYX ROAD
MIRAMAR FL 33025**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **HARBIN, WILBUR T., SR.**
STREET ADDRESS **3316 ONYX ROAD**
CITY-ST-ZIP **MIRAMAR FL**

TITLE **VD** ☐ DELETE
NAME **WESLEY, WILLIAM**
STREET ADDRESS **4111 N.W. 191 ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **STD** ☐ DELETE
NAME **SILVERA, MADGE**
STREET ADDRESS **3317 GARNET RD**
CITY-ST-ZIP **MIRAMAR FL**

TITLE **D** ☐ DELETE
NAME **ROLLE, BETTY**
STREET ADDRESS **18701 NW 23 CT**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Wilbur T. Harbin* **WILBUR T. Harbin**

2-10-97 **(954) 431-0797**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0025063

CR2E037 (9/96)