## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 08, 2002 8:00 am § Secretary of State **DOCUMENT # N26937** 05-08-2002 90047 037 \*\*\*\*61.25 MISHKAN T'HILLAH (TABERNACLE OF PRAISE) WORSHIP CENTER, INC. Principal Place of Business Mailing Address 2820 N.W. 167TH TERRACE 2820 N.W. 167TH TERR. COUCLIUM MIAMI FL 33056 MIAMI FL 33055 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0102818 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HARBIN, WILBUR T., SR. 3316 ONYX ROAD MIRAMAR FL 33025 Zip Code FI 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete (9/01)TITLE ☐ Addition HARBIN, WILBUR T., SR. NAME NAME STREET ADDRESS 3316 ONYX ROAD STREET ADDRESS CITY ST-ZIP MIRAMAR FL CITY-ST-ZIP ۷D TITLE ۷Ď Delete TITLE Change ☐ Addition NAME BROWN, YVONNE William Wesley 4111 N.W. 1912 Street NAME STREET ADDRESS 2735 RIVER RUN CIRCLE EAST STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33025 CITY-ST-ZIP <u> Miami, FL. 33055</u> ☐ Delete TITLE ☐ Change ☐ Addition NAME SILVERA; MADGE NAME<sup>®</sup> STREET ADDRESS 3317 GARNET RD STREET ADDRESS CITY-ST-7IP MIRAMAR FL CITY-ST-ZIP TITLE TR 😾 Delete Addition Brown, Yvonne 2735 River Run Civde East NAME FARMER, EDRIÇKA STREET ADDRESS 3301 NW 182ND STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33055 CITY-ST-ZIP Miramar FL 33025 TITLE Delete TITLE Change ☐ Addition MOODY, BRIGETTE NAME NAME STREET ADDRESS 20014 NW 12 PL STREET ADDRESS CITY-ST-7IP **MIAMI FL 33169** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

STREET ADDRESS

CITY-ST-ZIP

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: 4

STREET ADDRESS

CITY-ST-ZIP

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/21/02

(954) 431-0797

**FILED**