FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



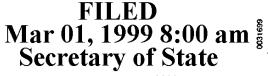
FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N27006

1. Corporation Name



03-01-1999 90113 033 ****61.25

| GHEATE C. | H HULY CHUSS MISSIUNA | INY BAPITOI CE | IUHUH, IN | | | | | | | | |
|---|-------------------------------------|---------------------|------------------------|-------------------------------|--|---|-------------------------------|------------------|--------------|--------------|--------------|
| Principal Place of Business Mailing Address | | | | | | | • | | | | |
| 1555 N.W. 93R MIAMI FL 3314 | D TERRACE | • | 1555 N.W. 93RD TERRACE | | | | | | | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | | 3. Date Incorporated or Qualifed 06/17/1988 | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | 4. FEI Number | | | Apr | olied For |
| 2 | m, 610. | 27 | | | | | 59-2801008 | 3 | | | t Applicable |
| City & Stat | 8 | City & State | | | | | 5 5 111 1 10 | | п. | \$8.75 A | dditional |
| 3 | | 28 | | | | | 5. Certifcate of S | tatus Desired | | Fee Re | quired |
| Zip Country | | Zip Country | | | 6. Election Campaign Financing \$5.00 May Be | | | | | | |
| 4 | 25 | 29 | 30 | | | | Trust Fund Co | ntribution | <u> </u> | Added to | |
| <u></u> | 9. Name and Address of Currer | nt Registered Agent | | | | | 10. Name and Ad | dress of New I | Registered / | Agent | |
| | | | | 81 | Name | | | | | | |
| STRANGE | , REV. DR. W.L., SR. | | | 82 | Street A | Addrass | s (P.O. Box Numbe | er is Not Accept | able) | • | |
| | 93RD TERRACE | | "- | Oli COL 7 | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | dulas (1.0. box number to net necestration | | | | | |
| MIAMI FL 33147 | | | | 83 | | | | | | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ••• | | | 84 | City | | | | FL | 85 Zip C | Code |
| 12. | | ND DIRECTORS | | tered Agen 13. .1 TITLE | t signature re | TD | hen reinstating) ADDITIONS/CH | 4 | | D DIRECTO | RS IN 12 |
| TITLE | D | U 0 | | | | | ARIAN | wat | SAN | - Change | Man Addition |
| NAME | STRANGE, W.L., SR. | | | 2 NAME | | 95 | 5 mw 8 | | | • | Ì |
| STREET ADDRESS | 1555 NW 93 TERR | | | | ADDRESS | 400 | iani 7 | 1 07 | 150 | | • |
| CITY-ST-ZIP | MIAMI FL | | | .4 CITY-ST | -ZIP | -111 | I CIMI 4 | L. 93 | 120 | Change | Addition |
| TITLE | D ID | × | | | | | | | | aa | |
| NAME | STRANGE, W.L., JR. | | | 2 NAME | 1000000 | | | | | | 1 |
| STREET ADDRESS | 18731 NW 42 CT | | | | ADDRESS | | , | | | | |
| CITY-ST-ZIP | CAROL CITY FL | | | 2. 4 CITY-S 1.1 TITLE | I-ZIP | | | | | Change | Addition |
| TITLE | D Strange, Nathan H | ٥٠ | | 2 NAME | | | | | | _ • | _ |
| NAME STREET ADDRESS | 40704 1844 40 07 | | | | ADDRESS | | | | | | |
| | 16731 NW 42 01 MIAMI FL | | | .4. CITY-S | | | | | | | |
| CITY-ST-ZIP TITLE | INITATE I L | | | 1.4. CITT-3 | 1-411 | | | * | | ☐ Change | Addition |
| NAME | | | | . 2 NAME | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | • | 1 |
| CITY-ST-ZIP | | | | .4 CITY-S1 | | | | | | | |
| TITLE | | | | 5.1 TITLE | | | | , | | ☐ Change | ☐ Addition |
| NAME | | | | 3.2 NAME | | | | | | | |
| STREET ADDRESS | | | | 3 STREET | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 5.4 CITY-\$ | r-ZiP | L | · . | | | | |
| TITLE | and the second second second second | | ELETE (| 3.1 TITLE | | | | • | , | Change | ☐ Addition |
| NAME | | | 6 | 3.2 NAME | | | | | | | |
| STREET ADDRESS | | • | 6 | 3.3 STREET | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 6.4 CITY-S | r-zip | | | | | | |

14. Thereby 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, with all other like empowered.