

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47611

FILED
Mar 22, 2009
Secretary of State

Entity Name: NEW LIFE PENTECOSTAL CHURCH MIRACLE CENTER INC.

Current Principal Place of Business:

116 S. 61ST TERRACE
HOLLYWOOD, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 816576
HOLLYWOOD, FL 330810576

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADELEKAN, ADEMOLA
2609 TAFT ST.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FALODUN, ISAAC
Address: 201 SW 68 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: FS () Delete
Name: OLAWALE, OLALEYE MR.
Address: 3440 N.W. 203ST
City-St-Zip: MIAMI, FL 33055

Title: GS () Delete
Name: MES AWE, OLUYEMI
Address: 7471 NW 21ST PL
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T () Delete
Name: AJAYI, JOSHUA MR.
Address: 2030 NW 119ST
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: ORINDARE, FOLA MRS.
Address: 14610 SOUTH SPUR DRIVE
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISAAC FALDOUN

PD

03/22/2009

Electronic Signature of Signing Officer or Director

Date