## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90014 050 \*\*\*\*61.25

DOOLING NIT #	NICOCOCOCOCO
DOCUMENT#	N93000000109

1. Corporation Name

PENTECOSTAL MOVEMENT ESMIRNA OF HOLLYWOOD, INC.

							-					
Principal Place of Business Mailing Address						and the second	•	•				
6451 PEMBROKE RD. 2305 SW 61 AVE. HOLLYWOOD FL 33023 HOLLYWOOD FL 33023												
2. Principal F	Place of Business	2a.	Mailing Address				3. Date Incorpo	rated or Qua	lifed			
21 26			,				12/31/1992					
Suite, Apt. #, etc.			Suite, Apt. #, etc.				4. FEI Number Applied For					
22							65-0380254 Not Applicable					
City & State			City & State			1	5. Certifcate of	Status Desire	ed 🗆	\$8.75 A		
23							+ee Required					
Zip ¬	Country	$\vdash$	Zip	Country ☐	,		6. Election Cam		cing 🗆	\$5.00		
24	25	29	3	0			Trust Fund C 10. Name and A		ow Penietore	Added to	rees	
	9. Name and Address of Current	Regist	tered Agent	81	Name		10. Name and A	uuless Oi II	en itegistere	Agent -		
					Ivanic							
GUZMAN, NIDIA C				82	Street	Address	ress (P.O. Box Number is Not Acceptable)					
2305 SW				83			4		· · · · · · · · · · · · · · · · · · ·			
HOLLYWO	OOD FL 33023			Ľ							<u> </u>	
				84	City			*.	F	85 Zip C	ode	
office or r agent. I a SIGNATURE	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with and accept the obligation of segments and of registered agent.  OFFICERS AND	Florid ons of, and the if	a Such change was auto Section 617,0503, Florid	onzed by a Statutes		oration s	nen reinstaurig)	S. I flereby a	//31/ DATE	99 AND DIRECTO	RS IN 12	
TITLE	D		DELETE	1.1 TITLE						☐ Change	Addition	
NAME	Guzman, Nidia			1.2 NAME						•	-	
STREET ADDRESS	2305 SW 61 AVE.				ET ADDRESS					* 4		
C/TY-ST-ZIP	MIRAMAR FL 33023			1.4 CITY-\$	T-ZIP			<del> </del>	· · ·			
TITLE	T		DELETE	2.1 TITLE		Ma	rgarita	نىلىچى ،	has	Change	☐ Addition (	
NAME	GARCIA, JEANNETTE			2.2 NAME		32	1 10 67	Ave	•			
STREET ADDRESS	1				TADDRESS	11 7	Ly wood.	11 -	3023			
CITY-ST-ZIP	N MIAMI BBEACH FL 33179			2. 4 CITY-5	ST-ZIP	PQ.	-dropsx	T19 :	) <del>1</del> 0043	Change	Addition	
TITLE	S		☐ D€LETE	3.1 TITLE		1						
NAME	QUINTANA, MIRIAM			3.2 NAME						,	1	
STREET ADDRESS				1	T ADDRESS	'					٠,	
CITY-ST-ZIP	HOLLYWOOD FL 33024		Deciete	3.4. CITY-5	ST-ZIP	+		<del></del>		Change	Addition	
TITLE	D		☐ DELETE	4.1 TITLE						ondings		
NAME	GUZMAN, JULIO			4. 2 NAME						•		
	2305 SW 61 AVE.				T ADDRESS	1						
CITY-ST-ZIP	MIRAMAR FL 33023		□ DELETE	4.4 CITY-S	T-ZIP	+			·	Change	Addition	
TITLE	D NOTI DA		☐ DELETE	5.1 TITLE 5.2 NAME					, .	L Silvingo	(	
NAME	OSORIO, NOELBA	10.40.5	,		T ADDRESS				•	* .		
STREET ADDRESS		·343-C	į.			'			1			
CITY-ST-ZIP	N. MIAMI BEACH FL 33179		DELETE	5.4 CITY-S 6.1 TITLE	1-28	4	<u> </u>		<u></u>	Change	Addition	
TITLE			☐ DECE 15	6.2 NAME			* * *			□ 3.44119°		
NAME	1			C.E. INCHANGE		I						

14. 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 pame appears in Block 12 or Block 13 if changed, or of an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS