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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000000643

1. Corporation Name

EVERLASTING GOSPEL OF NEW JERUSALEM INC.

Principal Place of Business

4297 N.W. 167 STREET
MIAMI FL 33055
US

Mailing Address

20464 NW 43RD PL
MIAMI FL 33055



2. Principal Place of Business 21 1049 NW 119 Street Suite, Apt. #, etc. 22 City & State 23 MIAMI, FLORIDA Zip 24 33056 Country 25 DADE	2a. Mailing Address 26 P.O. BOX 552618 Suite, Apt. #, etc. 27 City & State 28 CAROL CITY, FLORIDA Zip 29 33055 Country 30 DADE	3. Date Incorporated or Qualified 02/16/1993 4. FEI Number 65-0433521 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
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9. Name and Address of Current Registered Agent

TAYLOR, MICHAEL
14837 NW 7TH AVE
MIAMI FL 33168

10. Name and Address of New Registered Agent

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDO HILL, RALPH B 20464 NW 43RD PLACE MIAMI FL 33055	1.1 TITLE	PDO HILL, RALPH B. Apt. 3 2556 E. Superior Street Opa Locka, Florida 33054
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VPDO HILL, FRANCES W 20464 NW 43RD PLACE MIAMI FL 33055	2.1 TITLE	VPDO WASHINGTON, SANDRA 1941 NW 187 Terrace Miami, Florida 33169
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	ST HILL, RALPH B 20464 NW 43 PLACE MIAMI FL 33055	3.1 TITLE	S KIRKLAND, SABRINA. Apt. 2 955 SW 3 Street Miami, Florida 33130
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VSTO JOHNSON, MAEOLA 19730 NW 40 COURT MIAMI FL 33055	4.1 TITLE	T MARION, ANGELA 2556 E. Superior Street Apt. 1 Opa Locka, Florida 33054
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DO COOK, JAMES 19930 NW 3 PLACE MIAMI FL 33169	5.1 TITLE	DO COOK, JAMES 825 NW 168 Terrace Miami, Florida 33169
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DO WASHINGTON, SANDRA 1941 NW 187 TERRACE MIAMI FL 33056	6.1 TITLE	DO KIRKLAND, JAMES 955 SW 3 Street Apt. 2 Miami, Florida 33130
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE:

Katherine Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-99 305-685-0805

Date

Daytime Phone #

CR2E037-(11/99)