

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

02-15-2006 90125 001 ***140.00

DOCUMENT # N93000001425

1. Entity Name
SACRIFICE OF PRAISE WORSHIP CENTER, INC.



Principal Place of Business
17230 NW 33RD COURT
OPA LOCKA, FL 33056 US

Mailing Address
17230 NW 33RD COURT
OPA LOCKA, FL 33056 US

66021495



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02062006

Chg-NP

CR2E037 (11/05)

4. FEI Number
APPLIED FOR

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TATE, YVONNE M
17230 NW 33RD COURT
OPA LOCKA, FL 33056

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Yvonne M. Tate

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/7/06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete

NAME
TATE, YVONNE M
STREET ADDRESS
17230 NW 33RD COURT
CITY-ST-ZIP
OPA LOCKA, FL 33056

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME
TATE, BERYL SABRINA
STREET ADDRESS
17230 NW 33RD CT.
CITY-ST-ZIP
OPA LOCKA, FL 33056

TITLE ☐ Change ☐ Addition

TITLE TS ☐ Delete

NAME
MILTON, DOROTHY
STREET ADDRESS
3500 NW 172 TERR
CITY-ST-ZIP
MIAMI, FL 33055

TITLE ☐ Change ☐ Addition

TITLE D ☐ Delete

NAME
RILEY, TOMEKA
STREET ADDRESS
365 CIRCLE RD.
CITY-ST-ZIP
DACULA, GA 30019

TITLE ☐ Change ☐ Addition

TITLE D ☐ Delete

NAME
RILEY, MARC
STREET ADDRESS
365 CIRCLE RD.
CITY-ST-ZIP
DACULA, GA 30019

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Yvonne M. Tate

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/06

DATE

Daytime Phone #