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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90263 010 ****61.25

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1. Corporation Name

FRIDAY REVIVAL PRAYER GROUP, INC.



451497 - 90263 - 10

Principal Place of Business

8700 MIRAMAR BLVD.
HOLLYWOOD FL 33025
US

Mailing Address

8700 MIRAMAR BLVD
HOLLYWOOD FL 33025



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 6120 WASHINGTON ST

27 Hollywood

28 Florida

29 33023 30 USA.

3. Date Incorporated or Qualified

11/15/1993

4. FEI Number

65-0462124

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

9. Name and Address of Current Registered Agent

ROACH, TERESA
8700 MIRAMAR BLVD
HOLLYWOOD FL 33025

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 TERESA ROACH
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

21 April 99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ROACH, TERESA
STREET ADDRESS 8700 MIRAMAR BLVD.
CITY-ST-ZIP MIRAMAR FL 33025

TITLE SD
NAME MULLINGS, ANTHONY
STREET ADDRESS 851 SW 67 AVENUE
CITY-ST-ZIP N LAUDERDALE FL

TITLE TD
NAME MCGHEE, EARL
STREET ADDRESS 6120 WASHINGTON STREET
CITY-ST-ZIP HOLLYWOOD FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE SD
2.2 NAME COREY CUNNINGHAM
2.3 STREET ADDRESS 8700 MIRAMAR BLVD.
2.4 CITY-ST-ZIP MIRAMAR 33025

3.1 TITLE TD
3.2 NAME BARBARA BURGARD
3.3 STREET ADDRESS 3301 SW. 47 TERRACE
3.4 CITY-ST-ZIP MIRAMAR 33025

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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: TERESA ROACH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)