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May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000005509 (5)

1. Corporation Name
INTERNATIONAL CHRISTIAN CENTER, INC.



Principal Place of Business Mailing Address
2414 W. OAKLAND PARK BLVD
OAKLAND PARK FL 33311
US
PO BOX 451967
SUNRISE FL 33322

3. Date Incorporated or Qualified
11/30/1993
4. FEI Number
65-0455253
Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 SAME 26 2414 W. Oakland Park Blvd
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27
23 Oakland Park FL 33311
24 Zip 25 Country 28 33311 29 30 US

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
REYES, EMILIO A
8004 NW 28TH PLACE
SUNRISE FL 33322

10. Name and Address of New Registered Agent
81 Name Rev. Joseph DeJesus
82 Street Address (P.O. Box Number is Not Acceptable)
5300 SW 7th COURT
83
84 City MARGATE FL 85 Zip Code 33068

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] (NOTE: Registered Agent signature required when reinstating) DATE

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include REYES, EMILIO A (marked for deletion), PINERO, AWILDA, MONTES DE OCA, MARILIANA, and blank rows.

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include DEJESUS, JOSEPH and blank rows.

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.

SIGNATURE [Signature] 4/1/98 979-0106

CF2E037 (10/97)