

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$165 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$305)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N94000004226 (6)

1. Corporation Name

WORLD INTERFAITH MINISTRIES, INC.

Principal Place of Business

2672 GRANADA BAY DRIVE
MELBOURNE FL 32934

Mailing Address

2672 GRANADA BAY DRIVE
MELBOURNE FL 32934

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/19/1994

3a. Date of Last Report

NA

4. FEI Number

59-3266894

Applied For

Not Applicable

5. Certificate of Status Desired

NA

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution NA

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

FILING FEE IS
\$61.25

8. This corporation has liability for interjurisdictional tax under s. 185.032,
Florida Statutes

Yes

NA

2. Principal Place of Business

21 1613 NE 16 ST

2a. Mailing Address

26 1613 NE 16 Street

Suite, Apt. #, etc.

22 NA

Suite, Apt. #, etc.

27 NA

City & State

23 Fort Lauderdale, FL

City & State

28 Fort Lauderdale, FL

Zip

24 33304

Country

25 USA

Zip

29 33304

Country

30 USA

9. Name and Address of Current Registered Agent

SOSNA, LAWRENCE S
2672 GRANADA BAY DRIVE
MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name

NA

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

TITLE D
NAME SOSNA, LAWRENCE S
STREET ADDRESS 2672 GRANADA BAY DRIVE
CITY-ST-ZIP MELBOURNE FL 32934

TITLE D
NAME SOSNA, JILL
STREET ADDRESS 2672 GRANADA BAY DRIVE
CITY-ST-ZIP MELBOURNE FL 32934

TITLE D
NAME BERKMAN, GARY
STREET ADDRESS 5882 SW 105 STREET
CITY-ST-ZIP MIAMI FL 33156

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

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-13-95

Date

305-566-9272

Daytime (Home #)

0000011

CR2E037 (3/95)