2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

Warm

Feb 03, 2004 08:00 AM DOCUMENT # N94000004602 Secretary of State 1. Entity Name PRAYER AND OUTREACH MINISTRIES, INC. Mailing Address Principal Place of Business 3000 N.W. 50TH ST. 3000 N.W. 50TH ST. MIAMI FL 33142 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-0563285 Not Applicable \$8.75 Additional Zio Country Zin Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MASON, WAYNE G Street Address (P.O. Box Number is Not Acceptable) 3000 N.W. 50TH ST. MIAMI FL 33142 Zip Code City 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 SIGNATURE Signature, lyped or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition ☐ Delete THILE TITLE MASON, WAYNE G 12.6.2.4E NAME 3000 N.W. 50TH ST. U00000028279 STREET ADDRESS STREET ADDRESS MIAMI FL 33142 02/04/04-80020-004 61.25 CITY-ST-ZIP CITY-ST-ZIP VDC Change Addition Delete THE HILE BURCH, ERIC NAME NAME 2040 NW 5 PLACE STREET ADDRESS STREET ADDRESS MIAMI FL 33127 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE WILLIAMS, ANTOINÉ NAME NAME 8461 NW 5 COURT STREET ADDRESS STREET ADDRESS MIAMI FL 33150 CITY-ST-ZIP CITY-ST-7IP ☐ Change THILE ☐ Addition ☐ Delete រានF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GITY - ST-ZIP Addition Change ☐ Defete TITLE BIRE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete 3373 F TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP 12. 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 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

FILED

1-29-04 385-635-8894