

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **N 94000005097**
1. Corporation Name

DAYBREAK GOSPEL MINISTRIES, Inc.

Principal Place of Business

Mailing Address

5606 Douglas street,
Hollywood, Fl 33021.

P.O. Box 694742
Miami, Fl 33269

FILED
Apr 25, 1999 8:00 am
Secretary of State

04-25-1999 90014 095 *****8.75
04-25-1999 90014 096 *****61.25



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		October 14, 1994	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-395064	
24 Country		29 Country		5. Certificate of Status Desired	
				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

Selvyn Gooden
5606 Douglas st
Hollywood, Fl 33021

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President/ <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Selvyn Gooden	1.2 NAME	
STREET ADDRESS	5606 Douglas st, Hollywood	1.3 STREET ADDRESS	
CITY-ST-ZIP	Florida, 33021	1.4 CITY-ST-ZIP	
TITLE	*** V/P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Colleen Gooden	2.2 NAME	
STREET ADDRESS	5606 Douglas, Hollywood, Fl 33021	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	Calvin Chin / D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	200 N.W 199 st.	3.2 NAME	
STREET ADDRESS	Miami, Fl 33169.	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	Secretary <input type="checkbox"/> DELETE	4.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nicole Gooden	4.2 NAME	
STREET ADDRESS	5606 Douglas st	4.3 STREET ADDRESS	
CITY-ST-ZIP	Hollywood, Fl 33021	4.4 CITY-ST-ZIP	
TITLE	Lucie Nestor / D / T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1142 E. Romain Cir.	5.2 NAME	
STREET ADDRESS	Jacksonville, Fl 32225.	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

Selvyn Gooden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

April 12, 99 (954) 894-8342
Date Daytime Phone #

CR2E037 (1/98)