## 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 # N9500002578

1. Corporation Name

ON TARGET MINISTRIES, INC.

Principal Place of Business

770 NE 113TH STREET MIAM! FL 33161

Mailing Address

770 NE 113TH STREET

MIAMI FL 33161

## FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90114 002 \*\*\*\*61.25

(4) 104 12 501	,							OR HOLL TOOK	
	<b>`</b> .								
Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualifed		•		
21		26			05/25/1995				
Suite, Apt.	#, etc. Suite, Apt. #, etc.				4. FEI Number Applied For				
22	27				65-0583220		Not	Applicable	
City & StateCity & State					== 5. Certifcate of Status Desired			ditional	
23	28						ee Rec		
Zip	Country Zip Country			У	6. Election Campaign Financing	•	5. <b>00</b> n	•	
24	25	29	30		Trust Fund Contribution		dded to	Fees	
	9. Name and Address of Curre	ent Registered Agent		AT:	10. Name and Address of New Registere	d Agent			
			8	1 Name					
MEYER, MICHAEL				82 Street Address (P.O. Box Number is Not Acceptable)					
770 NE 113TH STREET									
MIAMI FL	•		8:	3					
			8	4 City		. 85	Zip Co	ode	
	•				F	L	'		
office or r agent. I a SIGNATURE	im familiar with, and accept the oblig	auons of, Section 617.0503, Flori	ga Statute	<b>.</b>	poration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate the properties of the purpose of the p		. as reg		
12.	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	ent exhibition reduit	ADDITIONS/CHANGES TO OFFICERS	AND DIF	RECTOF	RS IN 12	
TITLE	PT ·	☐ DELETE	1.1 TITLE				hange	Addition	
	MEYER, MICHAEL		1.2 NAME	ı		_		_	
NAME				ET ADDRESS					
STREET ADDRESS	[		1.4 CITY-	ı					
CITY-ST-ZIP	MIAMI FL 33161	☐ DELETE	2.1 TITLE			ПС	hange	Addition	
TITLE		- Dette le	2.7 NAME	i i		_	·	_	
NAME	AMMONS, CLEVELAND 7513 ARTHUR ST			ET ADDRESS				-	
STREET ADDRESS									
CITY-ST-ZIP	HOLLYWOOD FL 33024	DELETE	2.4 CITY 3.1 TITLE			ПС	hange	Addition	
IIILE	STT SWODECK, BERNA L	A DELETE	~3.2 NAME	. 1				_	
NAME		•	1	1		<del></del>	<del></del>	<del></del>	
STREET ADDRESS	1			ET ADDRESS					
CITY-ST-ZIP	NORTH MIAMI FL 33168	☐ DELETE	3.4. CITY 4.1 TITLE			ПС	hange	Addition	
TITLE		- Dette le	4.2 NAM	į					
NAME				ET ADDRESS					
STREET ADDRESS	:								
CITY-ST-ZIP		DELETE	4.4 CITY-				hange	Addition	
ITILE		T DETEIL	5.1 TITLE 5.2 NAME	i			······y·		
NAME	ļ								
STREET ADDRESS				ET ADDRESS	<u>.</u> •			•	
CITY-ST-ZIP		□ ne:	5.4 CITY- 6.1 TITLE		· · · · · · · · · · · · · · · · · · ·		hange	Addition	
TITLE		☐ DELETE				ПС	nange .		
NAME	(	•	6.2 NAME						
STREET ADDRESS			6.3 STRE	ET ADDRESS					

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP