SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name N95000003684 (6)

WORLD CHURCH OF METAPHYSICAL AND OCCULT FOR PSYC HIC RESEARCH, INC.

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Principal Place of Business Mailing Address							1 "	es ninge one adios disti deste doe	(88))) 68))) 1		NIERI INDIK RIBŁOW	Į[
				NCHTON CHURCH ROAD ASSA FL 33592								
								corporated or Qualified 8/03/1995	3a . Da	te of Las	t Report	
2. Principal Place of Business			2a. Mailing Address				4. FEI Nur	nber			Applied For	
21]		26									Not Applicab	le
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifica	ate of Status Desired	\$8.75 Additional Fee Required			
City & State	9	\vdash	City & State				1	n Campaign Financing)0 May Be	
23	1 6	28	7:-	T		····	 	and Contribution			ed to Fees	
Zip	Country	-	Zip Cou				1	8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes X No				
24]	9. Name and Address of Curren		tered Agent	[30]	Γ	· /	<u> </u>	and Address of New Re				\dashv
 	3. Helio Bio Addisos of Ositor	i iiogio	torou Agont		81	Name T			giatoroo x	gon		
THE L	AW FIRM OF LAWRENCE J SPIE	GEL C	HRTD				rank Bo					
343 AL	MERIA AVENUE	.OLL U	LE OTINID		82	Street Addre	reet Address (P.O. Box Number is Not Acceptable)					
CORAL	L GABLES FL 33134				83			on Church Rd.		les 2	in Code	
					64	Thonoto	sassa,	Florida	FL	85 Z	33592	
office or re	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	la. Such change was a	uthorized	i by i	the corporation						
SIGNATURE			,					June	11, 1	996		i
0.0.00.00.00	Signature, typed or printed name of registered age				d Age	nt signature requirec			DATE			_ _
12.	OFFICERS AN	D DIREC		13.			ADDITIO	INS/CHANGES TO OFFI	CERS AND			\g
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NAME	LEMON, JAMES P	OLI DO	10	2 2 N								
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	by certify that the information supplie	d with th	nis filing is voluntarily fu				y for the exen	nption stated in Section 1	19.07(3)(k), Florida	Statutes I	\exists

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 119.07(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:

June 11, 1996 813- 986- 8185

Baytime Phone #

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