

AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N95000004638 (1)

1. Corporation Name

BIBLE THEATRE INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

3591 NW 9TH AVENUE
FT. LAUDERDALE FL 33309

441 SO. STATE ROAD 7
SUITE 4
NO. FT. LAUDERDALE FL 33068

APPROVED
AND
FILED

98 NOV -5 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



0004274

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

BANKS, MARY
9752 SW 1ST ST.
PLANTATION FL 33324

3. Date Incorporated or Qualified

09/29/1995

4. FEI Number

65-0418934

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

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

TITLE PD ☒ DELETE

NAME BANKS, SYLVESTER JR
STREET ADDRESS 4301 NW 6TH COURT
CITY-ST-ZIP PLANTATION FL 33317

TITLE STD ☒ DELETE

NAME JONES, RENITA A
STREET ADDRESS 5428 NW 27TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☒ Vice-President ☒ DELETE

NAME THOMAS, CYNTHIA
STREET ADDRESS 4301 NW 6TH COURT
CITY-ST-ZIP PLANTATION FL 33317

TITLE ☒ President ☐ DELETE

NAME BANKS, MARY
STREET ADDRESS 9752 S.W. 1ST STREET
CITY-ST-ZIP PLANTATION FL 33324

TITLE ☒ Vice-President ☐ DELETE

NAME Tanya Thomas
STREET ADDRESS 705 Gardens Dr. #204
CITY-ST-ZIP Pompano Beach, FL 33069

TITLE ☒ Secretary ☐ DELETE

NAME Pamela Wendel
STREET ADDRESS 1614 N.W. 35 Street
CITY-ST-ZIP Oakland Park, FL 33309

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME CYNTHIA THOMAS
3.3 STREET ADDRESS 1041 Park Creek Circle
3.4 CITY-ST-ZIP LAWRENCEVILLE, GA. 30044

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 any attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)