FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N95000004843 (7) Feb 12 1998 8:00am Secretary of State

FILED

MIRAMAR CHRISTIAN CENTER, INC.								
							<u> </u>	
Principal Place of Business		Mailing Address			-	(OTOT DOUBLE CLOSE) (O		
7984 MIRAMAR PARKWAY		2836 ISLAND DRIVE			3. Date Incorporated or Qualified			
MIRAMAR FL 3 US	3023	MIRAMAR FL 33023				10/12/1995		
US		US				4. FEI Number		Applied For
						65-0624528		Not Applicable
2. Principal Place of Business		2a. Mailing Address				5. Certificate of Status Desired	₹ \$8.7	5 Additional
Suite, Apt. #, etc.		26	Suite, Apt. #, etc.				Fee	Required
22		27			6. Election Campaign Financing Trust Fund Contribution		May Be	
City & Stat	le	City & State		7. Is this nonprofit corporation a homeo		d to Fees		
23		28			Ye		mon r	
Zip	Country	Zip	Count	1ry		8. This corporation owes or has paid th		Intangible
24	25	29	30			Personal Property Tax due June 30.	[]⊋Yes	☐ No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registe	ered Agent	
			8	D1 Na	ame			
RAMNATH, RAJENDRANATH			8	32 St	reet Addre	ess (P.O. Box Number is Not Acceptable)		
2836 ISLAND DRIVE MIRAMAR FL 33023			-	13				
MIKAMA	H FL 33023		"	٦				
			8	14 Ci	ty		FL 85 Z	ip Code
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 617.0503, Florid 				 ove-nai	med corpo	pration submits this statement for the purpo	ose of changin	a its registered
office or i	registered agent, or both, in the State	of Florida, Such change was a	authorized	by the	corporation	on's board of directors. I hereby accept the	a appointment	as registered
SIGNATURE	with the second	The serious of the serious of the serious	Jiloa Sialui	103.				
	Signature, typed or printed name of registered ag	nnt and title if applicable (NOT	E: Registered A	Agent sig	nature required	d when reinstating) Do	ATE	
12.	T	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	•			1.1 TITLE			☐ Chang	e Addition
NAME	KALLOO, SHAFFICK		1.2 NAM	_				
STREET ADDRESS	7600 PEMBROKE ROAD, APT	. 1	1.3 STREET ADDRESS		ESS			
CITY-ST-ZIP TITLE	MIRAMAR FL 33023			1.4 CITY-ST-ZIP				
NAME	RAJENDRANATH, RAMNATH		1	2.1 TITLE 22 NAME			Chang	e
STREET ADDRESS			2.3 STREET ADDRESS		500			
CITY-ST-ZIP	MIRAMAR FL 33023				J			
TITLE	D DELETE			2.4 CITY-ST-ZIP 3.1 TITLE			Chano	e Addition
NAME				3.2 NAME			Cientify	- La recitotii
STREET ADDRESS	ACCO ICL ALIC DINA			3.3 STREET ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33023			3.4. CITY+ST-ZIP				
TITLE	D DELETE			4.1 TITLE			Change	e Addition
NAME	TURNER, EDWARD		4. 2 NAM	4. 2 NAME			- •	!
STREET ADDRESS	2925 N.W. 132RD TERRACE		4.3 STRE	4.3 STREET ADDRESS				
CITY-ST-ZIP	OPA ŁOCKA FL 33054		4.4 CITY	- ST- ZIP				
TITLE	D	DELETE	5.1 TITLE				☐ Change	e Addition
NAME	RAMNATH, ANGELA		5.2 NAMI	E				
STREET ADDRESS	2836 ISLAND DRIVE		5.3 STRE	et addr	ESS			
CITY-ST-ZIP	MIRAMAR FL 33023	·	5.4 City-	-ST-ZIP				
TITLE	D	☐ DELETÉ	6.1 TITLE			_ · · · <u>_</u> · · · · · · · · · · · · · · · · · · ·	☐ Change	e 🔲 Addition
NAME	RADHAY, ANTHONY	_	6.2 NAME	E				
STREET ADDRESS	17840 N.W. 67RD AVE. APT.	F	6.3 STREE	et addri	ESS			
CITY-ST-ZIP	HIALEAH FL 33015		6.4 CITY-	-ST-ZIP				

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.

SIGNATURE:

19541987-7300