2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004843

FILED Jul 05, 2007 Secretary of State

Entity Name: MIRAMAR CHRISTIAN CENTER, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	AMAR PARKWAY R, FL 33023 US		
urrent N	failing Address:	New Maili	ing Address:
	AMAR PARKWAY R, FL 33023 US		
n accordar	nce with s. 607.193(2)(b), F.S., the corporation did not receive	-	ce.
lame and	d Address of Current Registered Agent:	Name and	I Address of New Registered Agent:
	LVIA AMAR PARKWAY R, FL 33023 US		
	e named entity submits this statement for the purpos e of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
itle: lame: ddress: ity-St-Zip:	P () Delete RAMNATH, RAJENDRANATH 15221 SW 46TH COURT MIRAMAR, FL 33027	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: ame: ddress: ity-St-Zip:	T () Delete JENKINS III, ROBERT 4121 NW 26TH STREET LAUDERHILL, FL 33021	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: lame: ddress: :ity-St-Zip:	S () Delete NEISH, SILVIA 8760 N BERMUDA DR MIRAMAR, FL 33025	Title: Name: Address: City-St-Zip:	() Change () Addition
	D () Delete RICE, TERRENCE	Title: Name: Address:	D (X) Change () Addition OBIAJA, KENNETH 135 NW 109TH AVE UNIT 302 PEMBROKE PINES, FL 33026
ame: ddress:	1991 SW 164TH AVE MIRAMAR, FL 33027	City-St-Zip:	
itle: ame: ddress: itty-St-Zip: ittle: ame: ddress: itty-St-Zip:		City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SILVIA NEISH S 07/05/2007