FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE: _

DOCUMENT # N9500006046 (5)

NEW SAINT PAUL MISSIONARY BAPTIST CHURCH OF MIAM I, FLORIDA, INC.

Principal Place of Business		Mailing Address			- I INDIANAL DIA TATAL DIATI BANK ARMI ARMI ARMI ARMI ARMI ARMI ARMI ARMI		
254 NW 43RD STREET MIAMI FL 33127		254 NW 43RD STREET Miami Fl 33127					
					3. Date Incorporated or Qualified 11/27/1995	3a. Date of Last	t Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
	8 NW 74h ane	26				Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
	emi +1	City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees		
24 331	27 25 US	Zip	Countr	ý	8. This corporation has liability for in		s. 199.032,
24 331		30		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Current	negistered Agent	81	Name	10. Name and Address of New Re	gistered Agent	
4				Name			
SOLOMON, PAULINE			82	Street A	ddress (P.O. Box Number is Not Acceptable	e)	
4401 NW 2ND AVENUE			83	ļ			
MAMI FL	. 33127		•	1			
			84	City		FL 85 Z	ĭp Code
or register	to the provisions of Sections 617.0502 a red agent, or both, in the State of Florida ith, and accept the obligations of, Section	Such change was authorized	the above by the cor	named cor poration's b	poration submits this statement for the purp loard of directors. I hereby accept the appo	iose of changing its intment as registered	registered office d agent. I am
SIGNATURE .	·						
Signature, typed or printed name of registered agent and fitte if applicable (NOTE: Re				gistered Agent signature required when reinstaling) DATE			
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
	PD POOR POOR FOR PRO	DELETE	1.1 TITLE			Change	☐ Addition
NAME STREET ADDRESS	JOHNSON, ROOSEVELT REV.		1.2 NAME				
	254 NW 43RD STREET MIAMI FL 33127			I ADDRESS			
CITY-ST-ZIP TITLE			1.4 CITY - 2.1 TITLE	ST - ZIP		Change	Addition
NAME	JONES, JERRY	Dotter	2.1 HILE 2.2 NAME			L_J Change	☐ ¥00/floii
STREET ADDRESS	AAAR ABAL ARNA ALIMAN IIR			T ADODECC			
CITY-ST-ZIP	MIAMI FL 33138	•	2.3 STREET ADDRESS				
TITLE	TD DEL		2 4 CITY-ST-2IP 3 1 TITLE			Change	Addition
NAME	SOLOMON, PAULINE			•		□ onange	☐ ¥00⊞0⊓
STREET ADDRESS	TE AND AND ADDRESS		3.2 NAME	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33138		3.4. CITY-				
TITLE	D DELETE		4.1 TITLE	31-211		☐ Change	☐ Addition
NAME	PRUDENT, LONNIE	_	4. 2 NAME	:			
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33162		4.4 CITY -				
TITLE	D DELETE		5.1 TITLE		നനവാന വേദ്യ		☐ Addition
NAME	BENNETT, MILDRED		5.2 NAME	•	6000017 5 -04/26/96010 ***61.25	10 (30° 270/1	_
STREET ADDRESS 17809 NW 7TH AVENUE			5.3 STREET ADDRESS			21==041	
CITY-ST-ZIP	MIAMI FL 33167		5 4 CITY-	ST-ZIP	***O1.23		
TITLE	· · · · · · · · · · · · · · · · · · ·		6 1 TITLE			Change	Addition
NAME			6.2 NAME				_
STREET ADDRESS			6.3 STREE	1 ADDRESS			
	l .						

6.4 CITY-ST-ZIP

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 certify 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.

Cicles Salow #21-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED NAME OF

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