

FILE NOW: FILING FEE IS \$61.25

FILED
May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002165 (6)

1. Corporation Name

CHURCH OF JESUS-CHRIST OF MIAMI INC.



Principal Place of Business 1120 N.E. 155TH STREET N. MIAMI BEACH FL 33162	Mailing Address 1120 N.E. 155TH STREET N. MIAMI BEACH FL 33162
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3. Date Incorporated or Qualified 04/19/1996	
4. FEI Number 65-0682584	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 1120 NE 155 Street Suite, Apt. #, etc. 22 N/A City & State 23 N. Miami Beach, FL Zip 24 33162	2a. Mailing Address 26 1120 NE 155 St. Suite, Apt. #, etc. 27 N/A City & State 28 N. Miami Beach FL Zip 29 33162 Country 30 USA
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent GISME, JEAN GUIVARD PASTOR 1120 N.E. 155TH STREET N. MIAMI BEACH FL 33162	10. Name and Address of New Registered Agent 81 Name N/A 82 Street Address (P.O. Box Number is Not Acceptable) N/A 83 N/A 84 City N/A FL 85 Zip Code
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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, 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  DATE **4-12-98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GISME, JEAN GUIVARD	1.2 NAME	
STREET ADDRESS	1120 N.E. 155 STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL 33162	1.4 CITY-ST-ZIP	N/A
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICTOR, ISIDORE REV.	2.2 NAME	
STREET ADDRESS	557 N.E. 63RD STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33138	2.4 CITY-ST-ZIP	N/A
TITLE	DT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOLIERE, JEAN-NOEL	3.2 NAME	
STREET ADDRESS	1120 N.E. 155 STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL 33162	3.4 CITY-ST-ZIP	N/A
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS	N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	N/A	4.4 CITY-ST-ZIP	N/A
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS	N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	N/A	5.4 CITY-ST-ZIP	N/A
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS	N/A	6.3 STREET ADDRESS	
CITY-ST-ZIP	N/A	6.4 CITY-ST-ZIP	N/A

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 an attachment with an address.

SIGNATURE:  DATE **4-12-98** (305) **545-3307**

CR2E037 (10/97)