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FILED

May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000005231 (3)**

1. Corporation Name

ISAIAH & EZEKIEL LAW FOUNDATION CORP.

Principal Place of Business

Mailing Address

**6073 NW 167 ST.
SUITE C-7
MIAMI FL 33015**

**6073 NW 167 ST.
SUITE C-7
MIAMI FL 33015**

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

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/11/1996

4. FEI Number

65-0705084

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

LAW MARY

82 Street Address (P.O. Box Number is Not Acceptable)

115 SIERRA DRIVE

83

84 City

MIAMI

FL

85 Zip Code

33179

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 ☐ DELETE

NAME **PTD LAW, MARY**

STREET ADDRESS **1200 N.W. 175TH STREET**

CITY-ST-ZIP **MIAMI FL 33169**

TITLE ☒ DELETE

NAME **SD PRITCHETT, LINDA**

STREET ADDRESS **1230 NE 158TH ST.**

CITY-ST-ZIP **MIAMI FL 33162**

TITLE ☒ DELETE

NAME **CD PRITCHETT, GIL**

STREET ADDRESS **1230 NE 158TH ST.**

CITY-ST-ZIP **MIAMI FL 33162**

TITLE ☐ DELETE

NAME **T PICKETT, VERDIE JR**

STREET ADDRESS **2122 ADAMS ST., APT. 407**

CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ DELETE

NAME **D KNIGHT, JOEY**

STREET ADDRESS **1355 ALIBABA AVE**

CITY-ST-ZIP **MIAMI FL 33160**

TITLE ☒ DELETE

NAME **D CARTER, MERV**

STREET ADDRESS **4003 NW 200TH ST.**

CITY-ST-ZIP **MIAMI FL 33056**

TITLE ☐ DELETE

NAME **IC D Mercy Guarashuga**

STREET ADDRESS **6742 SW 15 ST**

CITY-ST-ZIP **MIAMI FL 33144**

TITLE ☐ DELETE

NAME **6.1 TITLE**

STREET ADDRESS **6.2 NAME**

CITY-ST-ZIP **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP

6.5 CITY-ST-ZIP

6.6 CITY-ST-ZIP

6.7 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary Law
4/27/98

Date

Daytime Phone #

0023028

CR2E037 (10/97)