

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 01, 2004 8:00 am
Secretary of State

09-01-2004 90001 010 ****75.00

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1. Entity Name

**INDEPENDENT MISSION CHURCH OF GOD BETHEL BY
THE FAITH INTERNATIONAL, INC.**



Principal Place of Business

**3434 NW 7 AVE
MIAMI FL 33127**

Mailing Address

**81 NE 53 ST
MIAMI FL 33137**

54071093

2. Principal Place of Business

4856 NW 2 AVE

Suite, Apt. #, etc.

MIAMI Florida

City & State

MIAMI Florida

Zip
33127

Country

3. Mailing Address

81 NE 53 ST

Suite, Apt. #, etc.

MIAMI

City & State

MIAMI Florida

Zip
33137

Country



MOORE

CR2E037 (4/04)

4. FEI Number

65-0748950

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MERCILUS, JEAN
81 NE 53 STREET
MIAMI FL 33137**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete

NAME **MERCILUS, JEAN**

STREET ADDRESS **81 NE 53 STREET**

CITY-ST-ZIP **MIAMI FL 33137 Same**

TITLE **DT** ☐ Delete

NAME **MOISE, LISA JEUDI**

STREET ADDRESS **P.O. BOX 370446**

CITY-ST-ZIP **MIAMI FL 33137 Same**

TITLE **DS** ☐ Delete

NAME **JEAN, VERTILE G**

STREET ADDRESS **P.O. BOX 370446**

CITY-ST-ZIP **MIAMI FL 33137 Same**

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rev. B. Pastor Jean Mercilus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 751-4118

8-30-04

Date

Daytime Phone #