

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000005

FILED  
Apr 20, 2004  
Secretary of State

Entity Name: SOUTHERN GOSPEL TEAM (USA), INC.

**Current Principal Place of Business:**

1001 SW 100 TERRACE  
PEMBROKE PINES, FL 330253619 US

**New Principal Place of Business:**

**Current Mailing Address:**

1001 SW 100 TERRACE  
PEMBROKE PINES, FL 330253619 US

**New Mailing Address:**

FEI Number: 65-0726377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THAYIL, PAUL  
1001 SW 100 TERRACE  
PEMBROKE PINES, FL 330253619

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: THAYIL, PAUL  
Address: 1001 SW 100 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 330253619

Title: VD ( ) Delete  
Name: POULOSE, JAMES  
Address: 811 MADISON PLACE CIRCLE  
City-St-Zip: KERNERSVILLE, NC 27284

Title: VD ( ) Delete  
Name: TITUS, JOHN T  
Address: 5385 NW 60 DR  
City-St-Zip: CORAL SPGS, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL THAYIL

PTD

04/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date