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Jul 29 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 # **N97000000452 (9)**

1. Corporation Name

JONATHAN SETTEL INTERNATIONAL MINISTRIES, INC.



Principal Place of Business 1876 NORTH UNIVERSITY DRIVE MERCEDE EXECUTIVE PARK #101-P PLANTATION FL 33322	Mailing Address 1876 NORTH UNIVERSITY DRIVE MERCEDE EXECUTIVE PARK #101-P PLANTATION FL 33322
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3. Date Incorporated or Qualified

01/28/1997

4. FEI Number

650751932

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

2. Principal Place of Business 21 6047 Kimberly Blvd. Suite, Apt. #, etc. 22 Suite - R City & State 23 North Lauderdale, FL. Zip 24 33068 Country 25 USA	2a. Mailing Address 26 6047 Kimberly Blvd. Suite, Apt. #, etc. 27 Suite - R City & State 28 North Lauderdale, FLA. Zip 29 33068 Country 30 USA
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SETTEL, JONATHAN
1876 NORTH UNIVERSITY DRIVE
MERCEDE EXECUTIVE PARK #101-P
PLANTATION FL 33322**

81 Name

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

83

84 City

FL

85 Zip Code

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

Sharon Settel (Vice President)

6/30/98

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PEXS
NAME	SETTEL, JONATHAN
STREET ADDRESS	1876 NORTH UNIVERSITY DRIVE
CITY-ST-ZIP	PLANTATION FL 33322
TITLE	VT
NAME	SETTEL, SHARON
STREET ADDRESS	1876 NORTH UNIVERSITY DRIVE
CITY-ST-ZIP	PLANTATION FL 33322
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	(b) President
1.2 NAME	Jonathan Settel
1.3 STREET ADDRESS	6047 Kimberly Blvd. Suite R
1.4 CITY-ST-ZIP	N. Lauderdale, FL 33068
2.1 TITLE	(b) Sharon Settel
2.2 NAME	Vice President
2.3 STREET ADDRESS	6047 Kimberly Blvd. Suite R
2.4 CITY-ST-ZIP	N. Lauderdale, FL 33068
3.1 TITLE	(b) Michael Stepakoff
3.2 NAME	220 E. Madison St. Suite 1010
3.3 STREET ADDRESS	Tampa, FL.
3.4 CITY-ST-ZIP	33602 Secretary/Treas.
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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:

Sharon Settel (Vice President)

6/30/98

(954) 917-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0037379

CR2E037 (10/97)