

FILE NOW: FILING FEE IS **\$61.25**

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May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001067 (4)
1. Corporation Name
PENTECOSTAL TABERNACLE OF NORTH MIAMI INC



Principal Place of Business: P.O. BOX 693576 MIAMI FL 33269
Mailing Address: P.O. BOX 693576 MIAMI FL 33269

3. Date Incorporated or Qualified: 07/08/1996
4. FEI Number: 65-0696000
Applied For: Not Applicable

2. Principal Place of Business: 21 647 NW 183rd Street, Suite, Apt. #, etc.
22 City & State: 23 Miami, FLORIDA
24 Zip: 33169, 25 Country
2a. Mailing Address: 26 Suite, Apt. #, etc.
27 City & State: 28
29 Zip, 30 Country

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

9. Name and Address of Current Registered Agent
STEWART, ROBERT S
1271 NW 175 TERRACE
MIAMI FL 33169

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	DELETED
NAME	WILLIAMS, NEVILLE	
STREET ADDRESS	10210 SW 168TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	DELETED
NAME	MCKENZIE, RALSTON	
STREET ADDRESS	13650 SW 17TH CT	
CITY-ST-ZIP	MIRIMAR FL	
TITLE	D	DELETED
NAME	CLARKE, VIN	
STREET ADDRESS	10260 SW 12 ST	
CITY-ST-ZIP	PEMBROKE PINES FL	
TITLE	S	DELETED
NAME	STEWART, JENNIFER	
STREET ADDRESS	1271 NW 175 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	DELETED
NAME	STEWART, SYDNEY R	
STREET ADDRESS	1271 NW 175 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
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 _____

CR2E037 (10/97)