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

Jan 29, 2004 08:00 AM Secretary of State DOGUMENT # N97000001301 1. Entity Name UNITED CHURCH OF JESUS CHRIST (APOSTOLIC) OF MIRAMAR, INC. Principal Place of Business Mailing Address 1050 S DIXIE HWY 3978 NW 36TH WAY HOLLYWOOD FL 33020 LAUDERDALE LAKES FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-0735694 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TAYLOR, GEORGE E Street Address (P.O. Box Number is Not Acceptable) 3978 NW 36 WAY FORT LAUDERDALE FL 33309 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition 🔲 TITLE ☐ Delete TITLE ☐ Change TAYLOR, GEORGE EDWARD U00000019560 NAME NAME 01/29/04-80030-004 61.25 3978 NW 36TH WAY STREET ADDRESS STREET ADDRESS LAUDERDALE LAKES FL 33309 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition TAYLOR, GLORIA MAUDE NAME NAME 3978 NW 36TH WAY STREET ADDRESS STREET ADDRESS U000000019560 LAUDERDALE LAKES FL 33309 CITY - ST-ZIP CITY-ST-ZIP 29/04-A0030-009 Addition ☐ Delete TITLE Change TITLE KERR, MARIA E NAME NAME 2816- SW 4TH PLACE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE DAILY, J. NAME MAME 1540 NW 31 AVE STREET ADDRESS STREET ADDRESS OPA LOCKA FL 33054 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THE ☐ Change ☐ Addition COOPER, MYRTELLA NAME NAME 490 NE 157TH TERRACE STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH FL 33162 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITLE TITLE ☐ Addition THOMAS, DAPHNY NAME NAME 17930 NW 40 WAY STREET ADDRESS STREET ADDRESS MIAMI FL 33055 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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. GEO RG E -E TAYLOR

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN.25th 2004/954 484 3463

Daytime Phone #

FILED