

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005740

1. Entity Name

PRAYER HOUSE OF THE APOSTOLIC FAITH, INC.

**FILED**  
**Feb 08, 2000 8:00 am**  
**Secretary of State**

02-08-2000 90058 015 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2014 NW 28TH ST  
FT LAUDERDALE FL 33311

C/O PASTOR BENNETTO HARRIOTT  
401 SW 73RD AVE  
N LAUDERDALE FL 33068-1428

2. Principal Place of Business

3. Mailing Address

2014 NW 28 St.

401 S.W. 73 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Church

Home

City & State

City & State

FT. Lauderdale, Fla

N. Lauderdale, Fla

Zip

Country

Zip

Country

33311

Broward

33068

Broward

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIOTT, CARMEN

401 SW 73RD AVE

N LAUDERDALE FL 33068

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.

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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
D	HARRIOTT, BENNETTO	401 SW 73RD AVE	N LAUDERDALE FL 33068	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	HARRIOTT, CARMEN	401 SW 73RD AVE	N LAUDERDALE FL 33068	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	ARMARO, HIPOLITO	450 NW 34TH ST #224	POMPANO BEACH FL 33064	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	FLORES, ISABELO	8301 NW 7TH ST	FT LAUDERDALE FL 33311	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	HARRIOTT, VYRLAND	1271 NW 29TH TERR #1	FT LAUDERDALE FL 33311	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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:** *Bennetto Harriott*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #