

FILE NOW: FILING FEE IS \$61.25

FILED

Sep 10 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 # **N97000005883 (0)**

1. Corporation Name

POWER YOUTH EVANGELISM, INC.



Principal Place of Business 1376 OSPREY COURT HOMESTEAD FL 33035-1052	Mailing Address 1376 OSPREY COURT HOMESTEAD FL 33035-1052
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3. Date Incorporated or Qualified 10/20/1997	
4. FEI Number 65-0789344	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A

9. Name and Address of Current Registered Agent RODRIGUEZ, ANGEL 1376 OSPREY COURT HOMESTEAD FL 33035-1052	
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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 FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PTD
NAME	RODRIGUEZ, ANGEL	1.2 NAME	RODRIGUEZ, ANGEL
STREET ADDRESS	1376 OSPREY COURT	1.3 STREET ADDRESS	1376 OSPREY CT.
CITY-ST-ZIP	HOMESTEAD FL 33035-1052	1.4 CITY-ST-ZIP	HOMESTEAD FL 33035-1052
TITLE	SD	2.1 TITLE	VICE PRESIDENT (D)
NAME	RODRIGUEZ, GINMARI	2.2 NAME	RODRIGUEZ, GINMARI
STREET ADDRESS	1376 OSPREY COURT	2.3 STREET ADDRESS	1376 OSPREY CT.
CITY-ST-ZIP	HOMESTEAD FL 33035-1052	2.4 CITY-ST-ZIP	HOMESTEAD FL 33035-1052
TITLE		3.1 TITLE	SECRETARY (D)
NAME		3.2 NAME	ADIS M. RODRIGUEZ
STREET ADDRESS		3.3 STREET ADDRESS	2000 SW 139 AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI FL 33175
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)