08171999-90009-001-$61.25-$61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # N98000002601

1. Corporation Name
NEW DESTINY CHRISTIAN CENTER INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
3601 W. COMMERCIAL BLVD. #35 FT. LAUDERDALE FL 33309	3601 W. COMMERCIAL BLVD. #35 FT. LAUDERDALE FL 33309

8/17/99 900009001 $61.25

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

3. Date Incorporated or Qualified: 05/06/1998

4. FEI Number: 65-0833757 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

DAVIS, KENNY M
7160 N.W. 47TH PLACE
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

(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 617.1506, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P/D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BENNETT, WOODROW		1.2 NAME		
STREET ADDRESS	3601 W. COMMERCIAL BLVD. #35		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		1.4 CITY-ST-ZIP		
TITLE	T/D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DAVIS, KENNY M		2.2 NAME		
STREET ADDRESS	3601 W. COMMERCIAL BLVD. #35		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		2.4 CITY-ST-ZIP		
TITLE	S/D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DAVIS, MICHELLE B		3.2 NAME		
STREET ADDRESS	3601 W. COMMERCIAL BLVD. #35		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
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, with all other like empowered.

KE

SIGNATURE: SIGNATURE REQUIRED 8/9/99 954-942-0804
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date — Daytime Phone #

CR2E037 (5/99)