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Jun 18, 1999 8:00 am
Secretary of State
06-18-1999 90012 002 ***550.00

PROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N98000003972

1. Corporation Name
Church of Power, Inc.

Principal Place of Business	Mailing Address
219 Palmwood Court Kissimmee, FL 34744	219 Palmwood Court Kissimmee, FL 34744

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 7/8/98

2. Principal Place of Business	2a. Mailing Address
400 Juno Largo Drive	26 400 Juno Largo Drive
Suite, Apt. #, etc.: #305	27 Suite, Apt. #, etc.: #305
City & State: Juno Beach, FL 33408	28 City & State: Juno Beach, FL 33408
Zip: 33408 Country: 25	29 Zip: 33408 Country: 30

4. FEI Number: 65-0874128 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Steven Barry 219 Palmwood Court Kissimmee, FL 34744	81 Name: Matthew Zifrony 82 Street Address (P.O. Box Number is Not Acceptable): 110 SE 6th Street, 15th Floor 83 84 City: Ft. Lauderdale FL 85 Zip Code: 33301

11. *Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.*

SIGNATURE: _____ Matthew Zifrony 6/10/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	Steven Barry		1.2 NAME		
STREET ADDRESS	219 Palmwood Court		1.3 STREET ADDRESS	400 Juno Largo Drive	
CITY-ST-ZIP	Kissimmee, FL 34744		1.4 CITY-ST-ZIP	Juno Beach, FL 33408	
TITLE	D	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	Gillian Barry		2.2 NAME		
STREET ADDRESS	219 Palmwood Court		2.3 STREET ADDRESS	400 Juno Largo Drive	
CITY-ST-ZIP	Kissimmee, FL 34744		2.4 CITY-ST-ZIP	Juno Beach, FL 33408	
TITLE	X	☒ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	Edward Gx Exinson		3.2 NAME	Ingrid Bachelor	
STREET ADDRESS	1845 NW 38th Avenue		3.3 STREET ADDRESS	5122 NW 43rd Avenue	
CITY-ST-ZIP	Lauderhill, FL 33313		3.4 CITY-ST-ZIP	Coconut Creek, FL 33073	
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		

CR2E034 (11/98)

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 607, 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.*

SIGNATURE: Ingrid Bachelor Ingrid Bachelor 6/10/99 (954) 525-7500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #