

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONSFILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 91406 033 ****61.25

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DOCUMENT # N98000004919

1. Corporation Name

INTERCESSORS' NETWORK OF MIAMI, INTERNATIONAL, INC.

657521

Principal Place of Business

Mailing Address

20451 NW 2ND AVE #106
MIAMI FL 33169~~P.O. BOX 897400~~
MIAMI FL 330253138 S University Dr.
Miramar, FL 33025

Principal Place of Business

2a. Mailing Address

3138 S University Dr.

26

3. Date Incorporated or Qualified

08/26/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0860635

Applied For

Not Applicable

City & State

MIRAMAR, FL

City & State

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

Zip

Country

33025

25

Zip

Country

29

30

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAW, JOAN
20451 NW 2ND AVE #106
MIAMI FL 331694930 SW 151 Terr.
Miramar, FL 33027

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D
SHAW, JOAN
4930 SW 151 TERRACE
MIRAMAR FL 33027☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP☐ Change ☐ AdditionD
CLARKE, HELGA
395 NE 154 STREET
N. MIAMI BEACH FL☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP☐ Change ☐ AdditionD
MINCEY, JUANITA
13720 NW 22ND AVENUE
OPA LOCKA FL 33054☒ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPDirector
Carol McKenny
7172 Pembroke Rd. Miramar FL 33025☐ Change ☒ AdditionD
SCARBOROUGH, PEGGY
20451 NW 2ND AVENUE
MIAMI FL 33169☐ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP☐ Change ☐ AdditionD
COOPER, PAUL
20451 NW 2ND AVENUE
MIAMI FL 33169☐ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP☐ Change ☐ Addition☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE REQUIRED

4/28/00 447-2665
#55199 (954) 436-7993

CR2E037 (11/98)