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ANNUAL REPORT
1999

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000006816

1. Corporation Name
PENTECOSTAL COMMUNITY SERVICE CENTER #1, INC.

Principal Place of Business	Mailing Address
2610 NORTHWEST 8TH STREET FORT LAUDERDALE FL 33311	2610 NORTHWEST 8TH STREET FORT LAUDERDALE FL 33311

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	12/03/1998
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 650880655 ☐ Applied For ☐ Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
24 Zip / 25 Country	29 Zip / 30 Country	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: ARthur BROWN
82 Street Address (P.O. Box Number is Not Acceptable): 224 S.W 22 AVE
83 Ft Laud FLA
84 City: FL 85 Zip Code: 33312

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 of 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: [signature] Brown ARthur BROWN 7/3/99
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BROWN, ARTHUR ~~2610 NORTHWEST 8TH STREET~~ 224 S.W 22 AVE FORT LAUDERDALE FL 33311	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Director Powell, SCOTT 732. N.W. 19th Ter. FORT Lauderdale, FL 33311	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KEMP, VIRGA ~~2610 NORTHWEST 8TH STREET~~ 3060 N.W. 9 St, FORT LAUDERDALE FL 33311	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WILLIAMS, BETTY J ~~2610 NORTHWEST 8TH STREET~~ 2741 N.W. 25 St. FORT LAUDERDALE FL 33311	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NEELEY, ORMAND ~~2610 NORTHWEST 8TH STREET~~ 2061 N.W. 24 St. FORT LAUDERDALE FL 33311	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANKERSON, JOHN W ~~2610 NORTHWEST 8TH STREET~~ 1618 N.W. 13 St. FORT LAUDERDALE FL 33311	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARLEY, ELLA ~~2610 NORTHWEST 8TH STREET~~ 2510 N.W. 31 Ave FORT LAUDERDALE FL 33311	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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.

SIGNATURE: [signature] SIGNATURE REQUIRED ARthur Brown 7/3/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #