

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000457

1. Entity Name

IMANI CHRISTIAN WORSHOP CENTER, INC.

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**FILED**  
**Sep 08, 2000 8:00 am**  
**Secretary of State**

09-08-2000 90005 047 \*\*\*\*70.00

Principal Place of Business

4440 NORTHWEST 37TH STREET  
LAUDERDALE LAKES FL 33319

Mailing Address

4440 NORTHWEST 37TH STREET  
LAUDERDALE LAKES FL 33319

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0891409

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE  
CORAL GABLES FL 33134

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

**After September 13, 2000 min. will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME BAAITH, RASHEED Z REV.  
STREET ADDRESS 4440 NORTHWEST 37TH STREET  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE STD ☐ Change ☒ Addition  
NAME Crowley, Robert  
STREET ADDRESS 3309 NW 9th Street  
CITY-ST-ZIP Fort Lauderdale, FL. 33311

TITLE VD ☐ Delete  
NAME ABRAMS-BAAITH, MARY L  
STREET ADDRESS 4440 NORTHWEST 37TH STREET  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STD ☒ Delete  
NAME TAYLOR, CARLA  
STREET ADDRESS 4440 NORTHWEST 37TH STREET  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARY ABRAMS-BAAITH

9-5-00  
MARY ABRAMS-BAAITH VD 954-677-8796

Date

Daytime Phone #

CR2E037 (5/00)