2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Aug 12, 2004 8:00 am Secretary of State DOCUMENT # N99000002553 08-12-2004 90003 040 ****61.25 FAITH TEMPLE OF DELIVERANCE, INC. Principal Place of Business Mailing Address 1323 NW 54TH ST 1323 NW 54TH ST TTOOUTT MIAMI FL 33142-3858 MIAMI FL 33142-3858 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (4/04) City & State City & State 4. FEI Number Applied For 65-0920218 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROOKS, TERESSA-Street Address (P.O. Box Number is Not Acceptable) 16231 NW 19 AVE MIAMI FL 33054-2077 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By September 8, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE BROOKS, TERESSA NAME 16231 NW 19 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33054-2077 CITY-ST-ZIP CITY-ST-ZIP TITLE Associate, Minister Delete TITLE DAVIS, ANITA NAME Willie SMI 700 NW 2035 Street 544 NW 107 ST STREET ADDRESS STREET ADDRESS miami, Florida 33168 **MIAMI FL 33168** CITY-ST-ZIP CITY-ST-ZIP Marcus Moise 410 NW 131 - Street THE Delete Change ☐ Addition GOREE, GREGORY NAME NAME 2435 NW 168 ST STREET ADDRESS STREET ADDRESS miami, Florida 33168 CITY-ST-ZIP MIAMI FL 33054 CITY-ST-ZIP Treasurer Jackson, Addie 1821 NW 166 & Street Delete TITLE Change Change ■ Addition ROBINSON: WILLIAM NAME 254 NW 51 ST STREET ADDRESS STREET ADDRESS **MIAMI FL 33142** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ■ Addition LADSON, CYNKETHIA NAME 701 NW 210 ST #311 STREET ADDRESS STREET ADDRESS MIAMI FL 33169 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

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: Jeressa Brooks Teressa Brooks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR