

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005797

FILED
May 02, 2005
Secretary of State

Entity Name: MISSIONARY BIBLE TABERNACLE, INC.

Current Principal Place of Business:

1925 NW 134TH ST
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

1925 NW 134TH ST
MIAMI, FL 33167

New Mailing Address:

FEI Number: 65-0950751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARPER, LOVELL
9360 NW 40TH COURT
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

HARPER, LOVELL
1925 NW 134TH ST
MIAMI, FL 33167 US

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: LOVELL HARPER

05/02/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARPER, LOVELL
Address: 9360 NW 40TH COURT
City-St-Zip: SUNRISE, FL 33351

Title: TT () Delete
Name: HUNTER, MAXWELL JR.
Address: 230 NE 13TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ST () Delete
Name: HUNTER, CAROLYN
Address: 17189 92ND LANE N.
City-St-Zip: LOXAHACHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARPER, LOVELL
Address: 1925 NW 134TH ST
City-St-Zip: MIAMI, FL 33167

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLYN HUNTER

ST

05/02/2005

Electronic Signature of Signing Officer or Director

Date