PROFIT . CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000018534

1. Corporation Name

LIGHTHOUSE BIBLE BOOKSTORE INC.

Principal	Place	of	Business

Mailing Address

18932 S DIXIE HWY

18932 S DIXIE HWY

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90258 004 ***158.75



MIAMI FL 33157	•	MIAMI FL 33157		DO NOT WRITE IN THIS SPACE				
				Date Incorporated or Qualifed	STACE			
				03/04/1994				
a Delevie el Di	and of Pusiness	2a, Mailing Address		4. FEI Number	Apr	plied For		
1092	10000 0 11 10000 0 0 11		ي العنو	65-0469824	1 1	t Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.		NIC H WY		\$8.75 A				
	m, etc.	27	·	5. Certifcate of Status Desired	Fee Re			
City & State		City & State		6. Election Campaign Financing	\$5.00	May Re		
23 MiAr		28 Min Fl.	33 15 7	Trust Fund Contribution	Added to	, ,		
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible			
24 33 15"		29 33157 3	7c.A	Personal Property Tax.		X No		
	9. Name and Address of Current	<u></u>		10. Name and Address of New Registered	Agent			
			81 Name	CARDONA THOMAS	ς			
CAR	DONA, THOMAS		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)				
1893	2 S. DIXIE HIGHWAY		189.3					
MLAN	N FL 33157		83	3. 131811				
			84 City n	lia Fl FL	85 Zip C	3157		
11 Pursuant I	to the provisions of Sections 667.0502	and 607.1508, Florida Statutes	, the above-named co	orporation submits this statement for the purpose o		registered		
office or re	egistered agent, or both, in the State o m temiliar with, and accept the obligati	f Florida. Such change was auti	norized by the corpora	orporation submits this statement for the purpose o ation's board of directors. I hereby accept the appo	intment as reç	jistered		
	III remiliar with, and accept the obligation	ons or, section dov. 0505, tono	a Statutes.					
SIGNATURE	Signature, typed or prime paine of egistered agent	and ove if applicable. (NOTE: R	egistered Agent signature req	uired when reinstating) DATE				
_12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12		
TITLE	PV\$T	☐ DELETE	1.1 TITLE		Change	☐ Addition		
NAME	CARDONA, THOMAS		1.2 NAME					
STREET ADDRESS	18932 S. DIXIE HIGHWAY		1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33157		1.4 CITY-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE		Change	☐ Addition		
NAME	CARDONA, THOMAS		2.2 NAME					
STREET ADDRESS	18932 S. DIXIE HIGHWAY		2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33157		2.4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition		
NAME.			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE		Change	Addition		
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
			4.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition		
NAME		_	5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
			5.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	6.1 TITLE		Change	Addition		
			6.2 NAME			_		
NAME			6.3 STREET ADDRESS			ì		
STREET ADDRESS			5.0 0 / ADDITEOU					

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 distent empowered to execute this report as required by Chapter 607, 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 enpowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Date

Daytime Phone #