

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000053119 (0)

1. Corporation Name
REBIRTH OF SOUL MINISTRIES, INC.



Principal Place of Business: **20341 NE 15TH AVE NORTH MIAMI BEACH FL 33179**
 Mailing Address: **20341 NE 15TH AVE NORTH MIAMI BEACH FL 33179-5105**

3. Date Incorporated or Qualified: **07/03/1995**
 3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business: **4928 S.W. 90 AVE**
 2a. Mailing Address: **4928 S.W. 90 AVE**

4. FEI Number: **65-0596657**
 Applied For: Not Applicable

22. Suite, Apt. #, etc.

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

23. City & State: **Cooper City, FL**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

24. Zip: **33328** 25. Country: **U.S.A.**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOSS, ROGER
20341 NE 15TH AVE
NORTH MIAMI BEACH FL 33179

81. Name: **DANTE A. MIRO**
 82. Street Address (P.O. Box Number is Not Acceptable): **4928 S.W. 90 AVE**
 84. City: **Cooper City, FL** 85. Zip Code: **33328**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Dante A. Miro* DATE: **4/10/97**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	DANTE A. MIRO	
STREET ADDRESS	4928 SW 90TH AVE	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ROGER MOSS	
STREET ADDRESS	2-341 NE 15TH AVE	
CITY-ST-ZIP	NO. MIAMI BEACH FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	ANNAMARIE PAWLEY	
STREET ADDRESS	17300 NW 43RD TERRACE	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dante A. Miro* DATE: **4/10/97** (1997) 434-7640

CR2E034 (9/96)