

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717429

**Entity Name:** NORTH MIAMI CHRISTIAN CHURCH, INC.**Current Principal Place of Business:**405 NE 135TH ST  
N. MIAMI, FL 33161**Current Mailing Address:**405 NE 135TH ST  
N. MIAMI, FL 33161 US**FEI Number:** 59-1489674**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRICHARRAN, MADHO P  
9754 W 34 COURT  
HIALEAH, FL 33018 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:** HARRICHARRAN, MADHO P.

03/29/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                   |
|-----------------|-------------------|
| Title           | T                 |
| Name            | KAMINSKI, PHILLIS |
| Address         | 182 NW 96 ST      |
| City-State-Zip: | MIAMI FL 33150    |

|                 |                     |
|-----------------|---------------------|
| Title           | P                   |
| Name            | HARRICHARRAN, MADHO |
| Address         | 9754 W. 34 COURT    |
| City-State-Zip: | HIALEAH FL 33018    |

|                 |                        |
|-----------------|------------------------|
| Title           | S                      |
| Name            | CHINAMOOTOO, LEAH      |
| Address         | 1235 NE 154TH ST       |
| City-State-Zip: | N MIAMI BEACH FL 33162 |

|                 |                        |
|-----------------|------------------------|
| Title           | T                      |
| Name            | JOHNSON, CATERINE ROSE |
| Address         | 405 NE 135TH ST        |
| City-State-Zip: | N. MIAMI FL 33161      |

*I hereby 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 all other like empowered.*

**SIGNATURE:** MADHO HARRICHARRAN

PRESIDENT

03/29/2021

Electronic Signature of Signing Officer/Director Detail

Date