

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007381

Entity Name: FLAME OF FIRE INTERNATIONAL MINISTRIES AND
RESOURCE CENTER, INC.**FILED**
Feb 04, 2013
Secretary of State
CC4101620893**Current Principal Place of Business:**16400 NW 15TH AVE
MIAMI, FL 33169**Current Mailing Address:**16400 NW 15TH AVE
MIAMI, FL 33169 US**FEI Number: 61-1428973****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRANKER, KIYATA SECRETARY
16400 NW 15TH AVE
MIAMI, FL 33169 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:** KIYATA BRANKER**02/04/2013**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	WRIGHT, URSULA T
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

Title	VP
Name	WRIGHT, SUSIE E
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

Title	D
Name	DOLPHUS, GARY
Address	2980 JOG ROAD
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	DOLPHUS, PATRICIA
Address	2980 JOG ROAD
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	MAGWOOD, SHERRY
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

Title	SECRETARY, TREASURER
Name	BRANKER, KIYATA N
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

Title	DIRECTOR
Name	REYES, ANGELA
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

Title	DIRECTOR
Name	REYES, CALVIN
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169

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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: KIYATA BRANKER**SECRETARY****02/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DALTON, SHAWN TAI
Address	16400 NW 15TH AVE
City-State-Zip:	MIAMI FL 33169