

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

DOCUMENT# N05000000849

**Entity Name:** HARVEST TIME ASSEMBLY OF GOD CHURCH NORTH MIAMI, INC**FILED**  
**Jan 27, 2021**  
**Secretary of State**  
**9675731484CC****Current Principal Place of Business:**1425 NE 139TH STREET  
NORTH MIAMI, FL 33161**Current Mailing Address:**PO BOX 611751  
NORTH MIAMI, FL 33261**FEI Number: 59-3804381****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BHOLA, ERROL B PASTOR  
1425 NE 139TH STREET  
NORTH MIAMI, FL 33161 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:** ERROL B BHOLA**01/27/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	BHOLA, ERROL B PASTOR
Address	1425 NE 139TH STREET
City-State-Zip:	NORTH MIAMI FL 33161
Title	SECRETARY
Name	FRANCIS, DOREEN
Address	620 NE 123 STREET
City-State-Zip:	NORTH MIAMI FL 33161
Title	TRUSTEE
Name	INNISS, JOSCELYN
Address	565 N.E. 157 STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162
Title	MEMBER
Name	INNISS, CORINNE
Address	565 N.E. 157 STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	VP
Name	BHOLA, YVONNE C
Address	1425 NE 139TH STREET
City-State-Zip:	NORTH MIAMI FL 33161
Title	TREASURER
Name	BHOLA, MARK P
Address	7150 N.W. 177 STREET UNIT 209
City-State-Zip:	HIALEAH FL 33015
Title	MEMBER
Name	BHOLA, MARCIA J
Address	7150 NW 177TH ST UNIT 209
City-State-Zip:	HIALEAH FL 33015

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:** ERROL B BHOLA**PASTOR****01/27/2021**

Electronic Signature of Signing Officer/Director Detail

Date