

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006289

Entity Name: BREAKTHROUGH INTERNATIONAL CHRISTIAN CENTER INC.**Current Principal Place of Business:**1560 SW 87TH TERR
PEMBROKE PINES, FL 33025**Current Mailing Address:**1560 SW 87TH TERRACE
PEMBROKE PINES, FL 33025**FEI Number: 59-3811271****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KNOWLES, BURLEY
1560 SW 87TH TERRACE
PEMBROKE PINES, FL 33025 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	KNOWLES, BURLEY
Address	1560 SW 87TH TERRACE
City-State-Zip:	PEMBROKE PINES FL 33025

Title	SD
Name	NOEL, NEKEISHA
Address	2335 NW 88 ST
City-State-Zip:	MIAMI, FL 33125

Title	TD
Name	LECONTE, LARISSA
Address	16945 NW 28 AVE
City-State-Zip:	MIAMI GARDENS FL 33056

Title	VPD
Name	KNOWLES, LINDA P
Address	1560 SW 87 TERR
City-State-Zip:	PEMBROKE,PINES FL 33025

Title	D
Name	JONES, WILLIE J
Address	1560 SW 87 TERR
City-State-Zip:	PEMBROKE,PINES FL 33025

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: BURLEY KNOWLES**PRESIDENT****03/07/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date