

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008613

Entity Name: SHEKINAH INTERNATIONAL MINISTRIES INC.

Current Principal Place of Business:

1017 EMILY'S WALK LN EAST
JACKSONVILLE, FL 32221

Current Mailing Address:

P. O. BOX 60424
JACKSONVILLE, FL 32221

FEI Number: 20-3344658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, MASCAREEN
1017 EMILY'S WALK LN EAST
JACKSONVILLE, FL 32221 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 P
Name COHEN, MASCAREEN
Address 1017 EMILY'S WALK LN EAST
City-State-Zip: JACKSONVILLE FL 32221

Title VP
Name JORDAN, BERNARD EBISHOP
Address 1 HIGH MEADOW
City-State-Zip: SADDLE RIVER NJ 07458

Title D
Name YATES, SABRINA
Address 7579 ORTEGA BLUFF PKWY
City-State-Zip: JACKSONVILLE FL 32244

Title TD
Name COHEN, EARL
Address 2349 MCCARTY DR
City-State-Zip: JACKSONVILLE FL 32210

Title D
Name LOPEST, MANUEL
Address 2011 W 11TH ST
City-State-Zip: JACKSONVILLE FL 32209

Title D
Name BEASLEY, DEBRA
Address 5002 LOFTY PINES CIRCLE EAST
City-State-Zip: JACKSONVILLE FL 32210

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: MASCAREEN COHEN

PRESIDENT

04/08/2017

Electronic Signature of Signing Officer/Director Detail

Date