| 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: YVONNETTE FRANCIS | VP | 03/17/2020 | | |

| SIGNATURE: YVONNETTE | FRANCIS |
|----------------------|---------|
| SIGNATORE. IVONNETTE | INANGIO |

Electronic Signature of Signing Officer/Director Detail

| tate-Zip: | PEMBROKE PINES FL 33025 | |
|-----------|-------------------------|--|
| | | |
| | | |
| | | |

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Officer/Director Detail : | | | | | |
|---------------------------|-------------------------|-----------------|--------------------------|--|--|
| Title | P | Title | VP | | |
| Name | FRANCIS, RUDOLPH D | Name | FRANCIS, YVONNETTE J | | |
| Address | 4750 NW 22CT #320 | Address | 4750NW 22ND CT | | |
| City-State-Zip: | LAUDERHILL FL 33313 | City-State-Zip: | LAUDERHILL FL 33313 | | |
| | | | | | |
| Title | TD | Title | S | | |
| Name | CLARKE, DONALD F | Name | WATSON, JOAN | | |
| Address | 395 NE 154 ST. | Address | 2929 E. MISSIONWOOD CIR. | | |
| City-State-Zip: | MIAMI FL 33162 | City-State-Zip: | MIRAMAR FL 33025 | | |
| | | | | | |
| Title | TD | Title | TREASURER | | |
| Name | MALCOLM, GRACE | Name | GLASGOW, ANNIE | | |
| Address | 11631 S.W. 2ND ST. #204 | Address | 6110 S.W 25 ST | | |
| City-State-Zip: | PEMBROKE PINES FL 33025 | City-State-Zip: | MIRAMAR FL 33023 | | |
| | | | | | |

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.

Name and Address of Current Registered Agent:

FRANCIS, RUDOLPH 4750 N.W. 22ND CT. 320

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16038

Entity Name: HARVEST FIRE WORSHIP CENTER, HOLLYWOOD, INC.

Current Principal Place of Business:

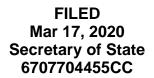
6024 WASHINGTON STREET HOLLYWOOD, FL 33023

Current Mailing Address:

6024 WASHINGTON STREET HOLLYWOOD, FL 33023 US

FEI Number: 51-0485759

LAUDERHILL, FL 33312 US



Certificate of Status Desired: Yes

Date

Date