

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000000622

**Entity Name:** POWER-LINE MEDIA MINISTRIES NETWORK INC

**Current Principal Place of Business:**

20822 NW 24TH CT  
MIAMI GARDENS, FL 33056

**Current Mailing Address:**

P O BOX 835107  
HOLLYWOOD, FL 33083 US

**FEI Number: 82-4101778**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MILLER, SAMUEL  
20822 NW 24TH CT  
MIAMI GARDENS, FL 33056 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 DP  
Name MILLER, SAMUEL  
Address 20822 NW 24TH CT  
City-State-Zip: MIAMI GARDENS FL 33056

Title DT  
Name WALLACE, JULIET  
Address 3031 WINDWARD WAY  
City-State-Zip: MIRAMAR FL 33025

Title DS  
Name MILLER, ALICE  
Address 20822 NW 24TH CT  
City-State-Zip: MIAMI GARDENS FL 33056

Title D  
Name SWEETLAND, PATRICE  
Address 1929 NW 46 AVE APT.G  
City-State-Zip: LAUDERHILL FL 33313

Title D  
Name GOSS BAKER, ANNMARIE  
Address 20822 NW 24TH CT  
City-State-Zip: MIAMI GARDENS FL 33056

*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: SAMUEL MILLER**

**PRESIDENT**

**04/18/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date