

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90177 026 \*\*\*150.00

**DOCUMENT # 269676**

1. Entity Name  
**CHURCH HOUSING CORP.**

Principal Place of Business

**222 MENORES AVENUE  
 CORAL GABLES FL 33134**

Mailing Address

**222 MENORES AVENUE  
 CORAL GABLES FL 33134**

**00047324**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1003257**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**KRASKA, CHRISTINE  
 223 MENDOZA AVE  
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After MAY 1, 2001 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
T	KRASKA, JOHN	215 MENDRA AVE	CORAL GABLES FL 33137	<input checked="" type="checkbox"/>
D	KRASKA, CHRISTINE	16444 S.W. 294 STREET	HOMESTEAD FL 33033	<input checked="" type="checkbox"/>
PD	KASCHYK, STEVE	9831 S.W. 110 TERR.	MIAMI FL	<input type="checkbox"/>
S	VIVIAN, ANDERSON	3920 ANDERSON ROAD	CORAL GABLES FL	<input type="checkbox"/>
AS	BETANCOURT, ESPERANZA	6282 SW 44TH ST	MIAMI FL 33155	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<i>S. D. Griffin, Jr.</i>	<i>8340 S. W. 48 Street</i>	<i>Miami, FL 33155</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Steve Kaschyk Pres.* 4/12/01 305 446-6132  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)