2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2001 8:00 am Secretary of State DOCUMENT # 716084 1. Entity Name CORNERSTONE BIBLE CHURCH OF MIAMI, INC. 01-30-2001 90053 015 ****61.25 Principal Place of Business Mailing Address 12260 S.W. 128TH TERR. 12260 S.W. 128TH TERR. MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address 9121 BELLINE DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0939263 Not Applicable MIAML Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 33157 DADE Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PREVITI, DONNA M., ESQ. 10511 N. KENDALL DR. SUITE C-205 Zip Code **MIAMI FL 33176** FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE TITLE Change ☐ Delete WHEELER, BRYAN NAME NAME STREET ADDRESS 9721 BELAIRE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33157 SD Change ☐ Addition TITLE TITLE ☐ Delete GONZALEZ, EDWIN NAME NAME 101000 SW 133 Course 14351 SW 90TH ST STREET ADDRESS STREET ADDRESS Miamis FL CITY-ST-ZIP MIAMI FL 33186 CITY-ST-ZIP 33186 TD TΔ Change ★ Addition TITLE M Delete TITLE SOTO, LUIS J. Hermandez, Luis-NAME NAME STREET ADDRESS 13300 SW 99TH PLACE STREET ADDRESS 14266 S.W. IOI STREET CITY-ST-ZIP CITY-ST-7/P **MIAMI FL 33176** MIAMI, FL 33186 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITL F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

with all other like empowered. changed, or on an attachm JANUARY 22, 2001

12. 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 of the trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if