## **2002 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # 760889 1. Entity Name SOUTHEASTERN SPANISH DISTRICT COUNCIL OF THE ASS

## FILED Jul 23, 2002 8:00 am Secretary of State 07-23-2002 90323 037 \*\*\*\*61.25

EMBLIE:	S OF GOD,	INC.											
Principal Plac	ce of Business		Maili	ng Address									
830 CAUFORNIA WOODS CIRCLE ORLANDO FL 32824 US  2. Principal Place of Business  Suite, Apt. #, etc.  City & State				830 CALIFORNIA WOODS CIRCLE ORLANDO FL 32824 US  3. Mailing Address Suite, Apt. #, etc.				) ( <u>3</u> 81() 181	<b>]] (</b> ]]]]]	1) ( <b>0</b> 101 201	( <b>0 (0</b> () <b>0</b> )0()	(18() SIB)) BIBII	<b>212() 812)1 1881</b>
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Zip Co		Country	Z	ip	Country			5. Certificate of Status Desired See Required					
	6. Name a	nd Address of Currer	nt Register	red Agent	<del>                                     </del>			. Name and	Address	of New	Registere	•	ill eu
						Name	<u>·</u>						<del></del> ,
ROJAS, R	KAMON J FORNIA WOO!	NS CIR			-	Street A	Address (P.C	). Box Numbe	r is Not A	cceptab	le)		
	) FL 32824	DO CIN				City		•.				• Tin C	ode
								ered agent, or both, in the State of Florida. I a				Zip Code	
SIGNATURE		printed name of registered age	·	•	TE: Registered	Agent signati	iture required whe	en reinstating)			DATE		
	Signature, typed or After Septer	printed name of registered age mber 13, 2002, be \$236.25.	·	•	mpaign Fir	nancing		5.00 May Bedded to Fees			ake Che		
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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all the empowered.

SIGNATURE:

70-60-17

<u>401-850-9861</u>