

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01693

1. Entity Name

PENTECOSTAL ASSEMBLIES, INC.

**FILED**  
**May 07, 2000 8:00 am**  
**Secretary of State**

05-07-2000 90034 012 \*\*\*\*70.00

Principal Place of Business 1535 NW 15TH AVENUE FT. LAUDERDALE FL 33311-5402	Mailing Address 1535 NW 15TH AVENUE FT. LAUDERDALE FL 33311-5402
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number **59-2379289**  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROYSTAN, TRACEY 4231 NW 19TH ST #255 LAUDERHILL FL 33313	Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 *Alexander SD* DATE **4-12-00**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
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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 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 other like empowered.

SIGNATURE: *Alexander Janelle* DATE: **4-12-00** DAYTIME PHONE #: **954-733-3142**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)