2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000004956

FILED Apr 29, 2003 Secretary of State

Entity Name: IGREJA EVANGELICA ASSEMBLEIA DE DEUS EM JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business: 7901 BAY MEADOWS CIR., #447 10075 GATE PARKWAY N. JACKSONVILLE, FL 32256 1108 JACKSONVILLE, FL 32246 **Current Mailing Address: New Mailing Address:** 10075 GATE PARKWAY N. 7901 BAY MEADOWS CIR., #447 JACKSONVILLE, FL 32256 1108 JACKSONVILLE, FL 32246 FEI Number: 02-0624690 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAX HOUSE CORPORATION 531 E. SAMPLE RD. POMPANO BCH, FL 33064 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SANTANA, MARCO A SANTANA, MARCO A Name: Name: 7901 BAY MEADOWS CIR., #447 Address: 10075 GATE PARKWAY N. 1108 Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32246 Title: VD Title: (X) Change () Addition () Delete SANTANA, VALQUIRIA P Name: SANTANA, VALQUIRIA P Name: Address: 7901 BAY MEADOWS CIR., #447 Address: 10075 GATE PARKWAY N. 1108 City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change () Addition GASPARETO, SAULO Name: Name: 11001 OLD SAN AUGUSTIN RD., #523 Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: RUAS, CALEBRE R Name: 8335 FREEDOM CROOSING TRAIL, #802 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARCO A. DE SANTANA PD 04/29/2003