2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State **DOCUMENT # N18608** 1. Entity Name EVER INCREASING GRACE MINISTRIES INTERNATIONAL, 04-25-2001 90372 028 ****70 00 Mailing Address Principal Place of Business P.O. 1150, SUITE 110 16201 SW 95 AVE ST STE 110 MIAMI FL 33257 MIAMI FL 33257 957274 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Apt # etc. Applied For 4. FEI Number City & State City & State 59-2772136 Not Applicable Country \$8.75 Additional Zip Country Certificate of Status Desired Fee Required - 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WILLIAMS, WINSTON W. 16201 SW 95 AVE ST STE 110 MIAMI FL 33157 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change Delete TITLE TITLE NAME WILLIAMS, WINSTON W. NAME STREET ADDRESS STREET ADDRESS 16530 SW 103 PL CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33157** ☐ Addition ☐ Change ☐ Delete TITLE V/D TITLE NAME WILLIAMS, CISLIN NAME STREET ADDRESS STREET ADDRESS 16530 SW_103 PL CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33157 Change ☐ Addition ☐ Delete TITLE TD NAME NAME LESLIE, MARY ANN STREET ADDRESS STREET ADDRESS 10520 SW 149 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE S/D Delete TITLE NAME **NELSON, BARBARA** NAME STREET ADDRESS STREET ADDRESS 16111 SW 109TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Addition V/D TITLE ☐ Change TITLE Delete NAME NAME CLABON, LESLIE STREET ADDRESS STREET ADDRESS 10520 SW 149 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE ☐ Delete TUCKER, ARTHNEL NAME NAME STREET ADORESS 10761 SW 150 TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33176** 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