

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000003822

FILED
Apr 28, 2003
Secretary of State

Entity Name: MIAMI BETHANY CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

2490 N.W. 35 STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

2490 N.W. 35 STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0434291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAUREGUI, OBED F REV
611 SE 4 PL
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: JAUREGUI, OBED F
Address: 611 SE 4 PL
City-St-Zip: HIALEAH, FL 33010

Title: ST () Delete
Name: RODRIGUEZ, GUILLERMO
Address: 836 NW 17 CT
City-St-Zip: MIAMI, FL 33125

Title: D () Delete
Name: JAUREGUI, FRANCISCO
Address: 611 SE 4 PLACE
City-St-Zip: HIALEAH, FL 33010

Title: D () Delete
Name: GARCIA, YULI
Address: 611 SE 4 PLACE
City-St-Zip: HIALEAH, FL 33010

Title: VP () Delete
Name: JAUREGUI, NOEMI
Address: 611 SE 4 PLACE
City-St-Zip: HIALEAH, FL 33010

Title: T () Delete
Name: CHE, CELINA
Address: 3421 NW 15 ST.
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CARBAJAL, MAURICIO
Address: 2468 NW 35 STREET
City-St-Zip: MIAMI, FL 33142

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: OBED F. JAUREGUI

PD

04/28/2003

Electronic Signature of Signing Officer or Director

Date