2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003066

1. Entity Name

NORTH HIALEAH BAPTIST CHURCH, INC. ✓

FILED
Jul 20, 2000 8:00 am
Secretary of State
07-20-2000 90024 045 ****70.00

Principal Place of Business	Mailing Address
5800 PALM AVE HIALEAH FL 33012	5800 PALM AVE HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0774197 ☐ 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
RAMOS, DANIEL 220 SW 65TH WAY PEMBROKE PINES FL 33032	Name DANIEL RAMOS Street Address (P.O. Box Number is Not Acceptable) 220 SW 65 WAY City PEMBROKE PINES **FL** Zip Code 33023

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 Daniel Ramos 7/11/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EIKENBERRY, JAMES 3180 W. 10TH AVE. HIALEAH FL 33012	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAMOS, DANIEL 220 SW 65 WAY PEMBROKE PINES FL 33023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SELBY, DOROTHY 1825 W 44 PL #504 HIALEAH FL 33012	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NEALEY, MARY LU 691 W. 50TH STREET HIALEAH FL 33012	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, JIMMY 1255 W 49 PL #B112 HIALEAH FL 33012	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSELLO, RENE G 12100 SW 271ST ST. HOMESTEAD FL 33032	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (5/00)

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: Rene G. Rosello RENE G. ROSELLO 7-12-00 305-821-4021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #