2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **N94000005530** Mar 14, 2000 8:00 am 1. Entity Name **Secretary of State** PRIMEIRA IGREJA ASSEMBLEIA DE DEUS BRASILEIRA. I 03-14-2000 90009 023 ****61.25 Principal Place of Business Mailing Address 300 NW 35TH STREET 300 NW 35TH STREET **BOCA RATON FL 33431** BOCA RATON FL 33431-5817 いりりょうしょんり 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0582830 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) RODRIGUES DE SOUZA , ROBERTO 300 NW 35TH ST **BOCA RATON FL 33431** City 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. 03/05/2000 SIGNATURE 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Delete TITLE ☐ Change TITLE PD NAME NAME RODRIGUES DE SOUZA, ROBERTO STREET ADDRESS STREET ADDRESS 9300 JAY WOOD TERR #J-115 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** Delete TITLE VPD TITLE ☐ Change ☐ Addition SILVER, CHARLES TADEU NAME STREET ADDRESS STREET ADDRESS 300 NW 35JH ST. CITY-ST-ZIP CITY-ST-ZIF BOCA RATON FL 33431 Addition TITLE TITLE NAME NAME APOLINARIO, GIL ANTONIO STREET ADDRESS STREET ADDRESS 300 NW 35TH ST. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** □ Delete ☐ Change ☐ Addition SD TITLE TITLE NAME SANTOS, JAFE GOMES NAME STREET ADDRESS STREET ADDRESS 300 NW 35TH ST. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Addition ☐ Change TITLE TITLE NAME MACHADO, MOYSES NAME STREET ADDRESS STREET ADDRESS 3801 NW 11TH/ST CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL TITLE TITLE ☐ Change ☐ Addition NAME PEREIRA, WANT MARIA NAME STREET ADDRESS STREET ADDRESS 3801 NW J/ S CITY-ST-ZIP CITY-ST-ZIP 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 03/05/2000 changed, or on an attachment with an address, with all other like empowered.