

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90140 046 ****61.25

DOCUMENT # N95000001876

1. Entity Name

COUPLES FOR CHRIST, INC.

Principal Place of Business

Mailing Address

**918 MARGINAL ROAD
 WEST PALM BEACH FL 33411**

**918 MARGINAL ROAD
 WEST PALM BEACH FL 33411**

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

65-0683561

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

**DURAN, JOSE O.
 918 MARGINAL ROAD
 WEST PALM BEACH FL 33411**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

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 ☐ Delete
 NAME **TP**
 STREET ADDRESS **DURAN, JOSE O**
 CITY-ST-ZIP **918 MARGINAL RD
 WEST PALM BEACH FL**

TITLE ☒ Delete
 NAME **TS**
 STREET ADDRESS **DURAN, MONINA A MD**
 CITY-ST-ZIP **918 MARGINAL RD
 WEST PALM BEACH FL**

TITLE ☒ Delete
 NAME **TVP**
 STREET ADDRESS **URGINO, JOSE (LITO) C**
 CITY-ST-ZIP **2250 NORTH NIAGARA #202
 BURBANK CA**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **TV**
 STREET ADDRESS **GLEN SANTAYANA**
 CITY-ST-ZIP **3044 MARION AVE
 MARGATE, FL 33063**

TITLE ☐ Change ☒ Addition
 NAME **TS**
 STREET ADDRESS **RAFAEL BENITEZ**
 CITY-ST-ZIP **2753 SW 133 RD AVE
 MIRAMAR, FL 33027**

TITLE ☐ Change ☒ Addition
 NAME **TT**
 STREET ADDRESS **RAYMUNDO NAVARRO**
 CITY-ST-ZIP **8156 NW 20TH TERR.
 MIAMI, FL 33015**

TITLE ☐ Change ☒ Addition
 NAME **TD**
 STREET ADDRESS **LITO T. GOMEZ**
 CITY-ST-ZIP **3009 NW 120 WAY
 SUNRISE, FL 33323**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jose O. Duran**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02 561-793 0815

CR2E037 (9/01)