

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2001 8:00 am
Secretary of State

0046571

DOCUMENT # N96000006546

1. Entity Name

TRUTH IN LOVE MINISTRY, INC.

04-07-2001 90001 007 ****61.25

819394



DO NOT WRITE IN THIS SPACE

Principal Place of Business 3001 NORTHWEST 46 AVENUE, SUITE 103 LAUDERDALE LAKES FL 33313		Mailing Address 3001 NORTHWEST 46 AVENUE, SUITE 103 LAUDERDALE LAKES FL 33313	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0716182		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FARAG, ESTAFAN N.S. 3001 NW 46TH AVE, #103 LAUDERDALE LAKES FL 33313		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D	FARAG, NASSER S <input type="checkbox"/> Delete STREET ADDRESS 3001 NORTHWEST 46 AVENUE, SUITE 103 LAUDERDALE LAKES FL 33313	TITLE VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	McIntosh, Tim STREET ADDRESS 910 NE 119th St. Biscayne Park, FL 33161
TITLE VD <input type="checkbox"/> Delete	FARAG, ESTAFAN N.S. STREET ADDRESS 3001 NORTHWEST 46 AVENUE, SUITE 103 LAUDERDALE LAKES FL 33313	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	McIntosh, Stacy STREET ADDRESS 910 NE 119th St. Biscayne Park, FL 33161
TITLE STD <input type="checkbox"/> Delete	FARAG, MARILYN S STREET ADDRESS 3001 NORTHWEST 46 AVENUE, SUITE 103 LAUDERDALE LAKES FL 33313	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Walker, Janice D STREET ADDRESS 8920 NW 4th St. Pembroke Pines, FL 33024
TITLE PD <input type="checkbox"/> Delete	WALKER, HAYWARD STREET ADDRESS 8820 NW 4TH ST PEMBROKE PINES FL 33024	TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Gisela Sanchez STREET ADDRESS P.O. Box 55 0175 Ft. Lauderdale, FL 33355
TITLE D <input checked="" type="checkbox"/> Delete	ADAMS, JAMIE STREET ADDRESS 3950 N 56TH AVE HOLLYWOOD FL 33021	TITLE D <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D <input checked="" type="checkbox"/> Delete	POWDERLY, NANCY STREET ADDRESS P. O. BOX 25063 N/A TAMARAC FL 33320	TITLE D <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *Marilyn S. Farag* **MARILYN S. FARAG** 1-16-01 (954) 733-4827
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)