2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # N98000005451 Apr 04, 2000 8:00 am Secretary of State CORAL BAPTIST CHURCH OF MIAMI, FLORIDA, INC. 04-04-2000 90017 041 ****61.25 Principal Place of Business Mailing Address 2732 S.W. 32ND AVENUE 2732 S.W. 32ND AVENUE MIAMI FL 33133-2822 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1022256 Not Applicable \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ENGEL, DANIEL W 1266 WEST FLAGLER ST. MIAMI FL 33135 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. **SIGNATURE** DATE agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Change ☐ Addition TITLE ☐ Delete NAME ENGEL, DANIEL W NAME STREET ADDRESS STREET ADDRESS 1266 WEST FLAGLER ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33135** TITLE Change ☐ Addition TITLE ☐ Delete NAME HOWARD, VIVIAN NAME STREET ADDRESS STREET ADDRESS 1729 S.W. 12 STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33135 ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME BYRUM, MEL NAME STREET ADDRESS STREET ADDRESS 7499 S.W. 34 TERR CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33155 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CUTY-ST-709 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 §17, 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

DAVIEL W.FVGE