

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 12, 2002 8:00 am
Secretary of State

08-12-2002 90010 028 ****61.25

DOCUMENT # N99000002845

1. Entity Name

WAY OF LIFE WORSHIP AND ARTS MINISTRIES INTERNATIONAL INC.

Principal Place of Business

Mailing Address

**318 MONTGOMERY AVENUE
 SARASOTA FL 34243**

**921 FAITH CIRCLE EAST
 #44
 BRADENTON FL 34202**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1009-154 ST NE

City & State

City & State

Bradenton, FL

4. FEI Number

59-3579348

Applied For

Not Applicable

Zip

Country

Zip

Country

34212

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

**GONZALEZ, STEVEN
 318 MONTGOMERY AVENUE
 SARASOTA FL 34243**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **STEVEN GONZALEZ**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/6/02

**After September 13, 2002,
 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 **P** ☐ Delete
 NAME **GONZALEZ, STEVEN**
 STREET ADDRESS **318 MONTGOMERY AVENUE**
 CITY-ST-ZIP **SARASOTA FL 34243**

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

TITLE **D** ☐ Delete
 NAME **GONZALEZ, ELIZABETH S**
 STREET ADDRESS **318 MONTGOMERY AVENUE**
 CITY-ST-ZIP **SARASOTA FL 34243**

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

TITLE **D** ☐ Delete
 NAME **GONZALEZ, ESTEBAN D**
 STREET ADDRESS **318 MONTGOMERY AVENUE**
 CITY-ST-ZIP **SARASOTA FL 34243**

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

TITLE **DS** ☐ Delete
 NAME **BELT, CANDY S**
 STREET ADDRESS **1009 154TH ST N EAST**
 CITY-ST-ZIP **BRADENTON FL 34202**

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

TITLE **D** ☐ Delete
 NAME **SARAZEN, EVELYN**
 STREET ADDRESS **SAN JUAN GARDENS SAN JUAQUIN #4**
 CITY-ST-ZIP **SAN JUAN PR 00926**

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

TITLE **D** ☐ Delete
 NAME **CANACHO, REBECCA G**
 STREET ADDRESS **3180 MONTGOMERY AVENUE**
 CITY-ST-ZIP **SARASOTA FL 34243**

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:

STEVEN GONZALEZ **8/6/02** **941 3603456**

CR2E037 (4/02)