

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000061

1. Entity Name

BARUCH CHRISTIAN FELLOWSHIP MINISTRIES, INC.

Principal Place of Business

13816 N.W. 7TH AVE.  
MIAMI FL 33168  
US

Mailing Address

13816 N.W. 7TH AVE.  
MIAMI FL 33168  
US

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

65-0370342

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

PINDER, JULIEANN  
130 N.W. 147 STREET  
MIAMI FL 33168

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 *Julieann Pinder*  
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 VP ☐ Delete  
NAME PINDER, PRINCEY  
STREET ADDRESS 130 N.W. 147TH STREET  
CITY-ST-ZIP MIAMI FL 33168

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

TITLE T ☐ Delete  
NAME BARNES, PATRICIA  
STREET ADDRESS 1238 112TH ST.  
CITY-ST-ZIP MIAMI FL 33168

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

TITLE T ☐ Delete  
NAME BOWE, ROSE  
STREET ADDRESS 11325 N.W. 12TH PL. #8  
CITY-ST-ZIP MIAMI FL 33189

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

TITLE TR ☐ Delete  
NAME CAMPBELL, JOSEPHINE  
STREET ADDRESS 130 N.W. 147TH ST.  
CITY-ST-ZIP MIAMI FL 33168

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

TITLE P ☐ Delete  
NAME PINDER, JULIEANN  
STREET ADDRESS 130 N.W. 147 ST.  
CITY-ST-ZIP MIAMI FL 33168

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

TITLE ☐ Delete  
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: *Julieann Pinder*

5-1-01



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)