

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90097 007 ****61.25

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1. Entity Name

**EVANGELICAL CHRISTIAN HUMANITARIAN OUTREACH FOR
CUBA, INC.**



Principal Place of Business

**12425 SW 88TH COURT
MIAMI FL 33176**

Mailing Address

**P O BOX 561954
MIAMI FL 33256**

60007494

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0510432**

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

**BABUN, TEO A JR.
12425 SW 88TH COURT
MIAMI FL 33256**

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P/D** ☐ Delete
NAME **BABUN, TEO A JR.**
STREET ADDRESS **12425 SW 88TH COURT**
CITY-ST-ZIP **MIAMI FL 33176**

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

TITLE **TSD** ☐ Delete
NAME **ALLCORN, FRANK**
STREET ADDRESS **12425 SW 88TH COURT**
CITY-ST-ZIP **MIAMI FL 33176**

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

TITLE **VP/D** ☐ Delete
NAME **SMITH, KENNETH DR.**
STREET ADDRESS **12425 SW 88TH COURT**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **HEGEMAN, NEAL REV.**
STREET ADDRESS **12425 SW 88TH CT**
CITY-ST-ZIP **MIAMI, FLA. 33176**

TITLE **VP** ☒ Delete
NAME **HUGET, RAFAEL**
STREET ADDRESS **12425 SW 88TH COURT**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **VICE PRESIDENT/DIRECTOR** ☐ Change ☒ Addition
NAME **THOMAS, DANIEL**
STREET ADDRESS **12425 SW 88TH CT.**
CITY-ST-ZIP **MIAMI, FLORIDA 33176**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VICE PRESIDENT/DIRECTOR** ☐ Change ☒ Addition
NAME **DEAROLT, RICHARD A.**
STREET ADDRESS **12425 SW 88TH CT.**
CITY-ST-ZIP **MIAMI, FLA 33176**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **BEJUS, DAVID DR.**
STREET ADDRESS **12425 SW 88TH CT.**
CITY-ST-ZIP **MIAMI, FLA. 33176**

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:

SIGNATURE REQUIRED TEO A. BABUN, JR.

1/13/03 786-797-8594

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)