

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

FILED

03 FEB 12 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000002037

1. Entity Name **Disciples of Jesus Christ is the Lord and Savior, Inc.**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2801 Pine Island Rd N 301
Suite, Apt. #, etc.

3. Mailing Address

2801 Pine Island Rd N 301
Suite, Apt. #, etc.

City & State

Sunrise Fl.

City & State

Sunrise, Fl.

Zip

33322

Country

Browar

Zip

33322

Country

Broward

200013175128
27/03--01082--007 **61.25

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0658001**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Rev. Jose F. Nina

Street Address (P.O. Box Number is Not Acceptable)

2801 Pine Island Rd - N 301

City

Sunrise

FL

Zip Code

33322

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)

Feb/ 01/03

DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE **DP**
NAME **Nina, Jose F.**
STREET ADDRESS **2801 Pine Island Rd N #301**
CITY-ST-ZIP **Sunrise, Fl. 33322-2353**

TITLE **DV**
NAME **Mizriky, Erwin J.**
STREET ADDRESS **111 Sunrise Lakes Blvd**
CITY-ST-ZIP **Sunrise, Fl. 33322**

TITLE **D**
NAME **Alario-Nina, Mercedes A.**
STREET ADDRESS **2801 Pine Is Rd-N 301, Sunrise, Fl. 33322**
CITY-ST-ZIP **Sunrise, Fl. 33322**

TITLE **D**
NAME **Ramirez, Mariadel C**
STREET ADDRESS **111 Sunrise Lakes Blvd**
CITY-ST-ZIP **Sunrise, Fl. 33322**

TITLE **D**
NAME **Dominicis, Martha E**
STREET ADDRESS **2720 Pine Island Rd-N 203**
CITY-ST-ZIP **Sunrise, Fl. 33322**

TITLE **D**
NAME **Dominicis, Enrique J**
STREET ADDRESS **2720 Pine Island Rd-N 2720**
CITY-ST-ZIP **Sunrise, Fl. 33322**

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IN THIS SPACE

12. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED037B (12/02)