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

## FILED Apr 29, 2002 8:00 am Secretary of State

<b>ANILOKW: BÁŽÍNĚ</b>	99 KEPUKI	(ARK)		JI 29, 2002		
DOCUMENT # 720477  1. Entity Name Str ATH ANASIOS GREEK OR thodoy Church a Fla Corp not for Profit  DO NOT WRITE IN THIS SPACE				Secretary of State 04-29-2002 90136 005 ****61.25		
Suite, Apt. #, etc.  FF 2			DO NOT WRITE IN THIS SPACE		PACE	
City & State City & State		e •	4. FEI Number Applied For Not Applicable			
Zip 33155 Country Data	Zip	Country	5. Certificate of S	5. Certificate of Status Desired		
			7. Name and Addr	ess of Current Registered A	· ·	
DO NOT WE	)   T-F-	Name 2	550i0	ROAS		
DO NOT-WF	Street Add	Street Address (P.O. Box Number is: Not/Acdaptable)				
IN THIS SPACE			54.t. 25			
		City	Miami 25 FL 33/5-1			
SIGNATURE  SIGNATURE  Signature, typed or printed fame of registered agent and	<u></u>	Registered Agent signature	£	apr	116,02	
FEE IS \$61.25 9. Election Campa Initial or Amended UBR Trust Fund Con			\$5.00 May Be Added to Fees	Make Check Department		
10. OFFICERS AND DIRE	CTORS	TITLE	- 4°			
NAME Geo. S. Grove 9/15		NAME	•			
STREET ADDRESS 6741 CORPLWAY #725 CITY-ST-ZIP # 7214		STREET ADDRESS CITY-ST-ZIP		•	92	
PIERRO PIRECTOR		TITLE				
NAME STREET ADDRESS 6200 S.W &H St C61-4646		NAME Street Add <del>r</del> ess	, p	•	(	
CITY-ST-ZIP MIRMI, FLA SSILIS	305-661-864	CITY-ST-ZIP				
	POULOS PIRETO	TITLE				
TREET ADDRESS 12130 S.W.9614	31. /	NAME STREET ADDRESS	50	NOTME		
STREET ADDRESS MIAM   FLA. 33/86 - 274-48/5		CITY-ST-ZIP	<del>- DO</del>	NOT WRIT		
IITLE ) NAME		TITLE NAME	IN 7	THIS SPAC	E	
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STREET ADDRESS		STREET ADDRESS			Ì	
CITY-ST-ZIP		CITY-ST-ZIP	*		Į	

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 on an attachment with an address, with all other like arrowwered.

**SIGNATURE:** 

4/1402 - 3054450508