2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 17, 2004 8:00 am Secretary of State

DOCUMENT # 723497 1. Entity Name THE APOSTLES OF INFINITE LOVE, INC.						02-17-2004 90018 002 ****70.00			0.00
Principal Place of Business 9578- 170TH TERRACE MCALPIN, FL 32062-9801 US		Mailing Address 9578- 170TH TERRACE MCALPIN, FL 32062-9801 US		<u> </u>					
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2. Principal P	lace of Business	3. Mailing Address			-				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01262004	01262004 Chg-NP CR2E037 (10/03)				
City & City		City 9 State			4. FEI Numbe				plied For
City & State		City & State			59-1403			— — — — — — — — — — — — — — — — — — —	t Applicable
Zip	Country	Zip	Cou	intry	5. Certificate	of Status Desire	d 🔽	\$8.75 Add Fee Required	
. 4,	6Name and Address of Current	Registered Agent			7. Name and	Address of Nev	v Registered		
FR MATE	O DU COEUR DE JESUS			Name			_	•	•
9578- 170	TH TERRACE			Street Add	Address (P.O. Box Number is Not Acceptable)				
MCALPIN,	FL 32062-9801								
				City			F	Zip Code	
8. The above	named entity submits this statement for	or the purpose of changing its	registere	ed office or re	egistered agent, or bot	h, in the State of			and accept
	ions of registered agent.								
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SIGNIATURE		-,		<u> </u>		·			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	Registered	d Agent signature	required when reinstating)		 DATE		 :
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2004	and title if applicable. (NOT 9. Election Car Trust Fund (npaign F	inancing _	required when reinstating) \$5.00 May B Added to Fees		Make che	ck payable to	
	Filing Fee is \$61.25	9. Election Car Trust Fund (npaign F	inancing lon.	\$ 5.00 May B		Make che lorida Depa	artment of St	ate
10.	Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DII	9. Election Car Trust Fund (npaign F Contributi 11.	inancing ion.	\$5.00 May B Added to Fees		Make che lorida Depa	artment of St	ate
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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.

FR. MATEU DU COEUR DE JESUS ODA

SIGNATURE: M