

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # 731626**

1. Corporation Name

CHILDREN'S CRUSADE FOR PEACE, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

2000 N.E. 55TH ST. FT. LAUDERDALE FL 33308 2000 N.E. 55TH ST. FT. LAUDERDALE FL 33308

FILED May 06, 1999 8:00 am § Secretary of State

05-06-1999 90045 027 ****61.25



3. Date Incorporated or Qualifed

2. Principal P	Principal Place of Business 2a. Mailing Address				3. Date Incorporated or Qualifed 01/17/1975			
21	26 Suite And # etc				4. FEI Number	TANK	lind For	
	ite, Apt. #, etc. Suite, Apt. #, etc.				59-1980547		Applied For Not Applicable	
22 City & Stat	ity & State 27 City & State				-	\$8.75 A		
23 City & Stat	City & State City & State				5. Certifcate of Status Desired	Fee Required		
Zip	Country Zip		Country		6. Election Campaign Financing \$5.00 May Be			
24	4 25 29 3			Trust Fund Contribution		Added to	Fees	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered	Agent		
			81	Name				
JANSEN, PHILIP PA 1749 N E 26TH ST. STE,E				82 Street Address (P.O. Box Number is Not Acceptable)				
84	City	F	85 Zip C	ode				
44	As the previous of Continue 617.050	and 617 1509 Florida Statutos	the show	e-named corr	poration submits this statement for the purpose of	f changing its	registered	
office or r	registered agent, or both, in the State of familiar with, and accept the obligat	nf Florida. Such change was auti	horized by	the corporation	on's board of directors. I hereby accept the appo	pintment as rec	jistered	
SIGNATURE	Signature, typed or printed name of registered agen				ad when reinstating) DATE			
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	R\$ IN 12	
TITLE	DV	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	MONACO, CARMEN M		1.2 NAME				[
STREET ADORESS	2000 NE 55TH ST		1.3 STREE	T ADDRESS			ł	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	0000		IT-ZIP				
TITLE	PD	☐ DELETE	2.1 TΠLE			☐ Change	Addition	
NAME	CERAVOLO, FRANK J		2.2 NAME					
STREET ADDRESS			2.3 STREE	TADORESS				
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		2.4 CITY+	ST-ZIP			<u></u>	
TITLE	DT	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAME	MONACO, ROBERT		3.2 NAME					
STREET ADDRESS	7625 N.W. 79TH AVE#202		3.3 STREE	TADDRESS				
CITY-ST-ZIP	TAMARAC FL		3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition i	
NAME			4. 2 NAME				-	
STREET ADDRESS	1		4.3 STREE	TADDRESS				
CITY-ST-ZIP			4,4 CITY-	T-ZIP			Addition	
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME				}	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.4 CITY-5 6.1 TITLE	51-ZIP		☐ Change	Addition	
TITLE		☐ DELETE	6.2 NAME	.		□ cusiña		
NAME				T 40000000			Ì	
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			6.4 CITY-	5T-Z3P				

14. 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 annual report or supplemental annual 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 12 or Block 12 if changed or of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed or of the corporation of the receiver or trustee empowered.

SIGNATURE: