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

Jan 23, 2003 8:00 am **Secretary of State DOCUMENT # 740734** 01-23-2003 90211 007 ****61.25 GLADEVIEW BAPTIST CHURCH OF MIAMI, INC. Principal Place of Business Mailing Address 12201 S.W. 26TH STREET 12201 S.W. 26TH STREET MIAMI FL 33175 MIAMI FL 33175 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-1680624 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 12201 SW 26 STREET **MIAMI FL 33175** City 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be **FILE NOW: FEE IS \$61.25** Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TD TITLE Delete TITLE ☐ Addition SHERAN, PAUL NAME NAME STREET ADDRESS 4342 SW 97 AVENUE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33165** CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Change PEJA, JORGE NAME 1431 SW 125 CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33184 CITY-ST-ZIP TITLE Delete ☐ Addition TITLE DEL SOL, ERNESTO NAME NAME 5541 SW 136 CT STREET ADDRESS STREET ADDRESS CITY-ST-7IP **MIAMI FL 33175** CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition CASTRO, ADRIAN NAME NAME STREET ADDRESS 13524 SW 115 CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33176 TITLE ☐ Delete ☐ Addition COUVERTIER, LUIS NAME NAME STREET ADDRESS 12043 SW 125 COURT STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33186** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition ROACH, CARL NAME NAME 3540 SW 125 CT STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

MIAMI FL 33175

FILED