2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Feb 01, 2002 8:00 am DOCUMENT # **744350 Secretary of State** 1. Entity Name UPPER ROOM ASSEMBLY, INC. 02-01-2002 90062 023 ****61.25 Principal Place of Business Mailing Address 19701 SW 127TH AVE 19701 SW 127TH AVE MIAMI FL 33177-1803 MIAMI FL 33177-1803 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FFI Number Applied For City & State 59-1889817 Not Applicable Country \$8,75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name res (P.O. Box Number is Not Acceptable) JOSEPH, JOHN P REV 19701_SW_127TH_AVE MIAMI FL 33177 Zip Code 33177 City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 **Department of State** Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Change ☐ Delete TITLE TITLE Joseph Shook NAME NAME KLEPP, REV. BRUCE 16161 SW 141 STREET ADDRESS STREET ADDRESS 15459 SW 143 TERR CITY-ST-ZIP CITY-ST-ZIP Miami MIAMI FL 33196 Change ☐ Addition Delete TITLE ER TITLE Plummer Dawson NAME PLUMMARI, DAWSON NAME STREET ADDRESS STREET ADORESS SW 177 Terr 10915 SW 177TH TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33157 ami Addition Delete ☐ Change Secretary TITLE TITLE D Norman Demilio COWEY, TOM-NAME 163 Street STREET ADDRESS 14480 SW STREET ADDRESS 10381 SW 156TH ST CITY-ST-ZIP 331 CITY-ST-ZIP iam MIAM! FL 33157 Addition Delete Change TITLE TITLE DS Miquel NAME NAME FISHBOUGH, CAL 14731 SW 150 Street STREET ADDRESS STREET ADDRESS 10965 SW 95TH STREET CITY-ST-ZIP Miami CITY-ST-ZIP MIAMI FL 33176 Addition Delete TITLE Change TITLE Marvin NAME NAME DEJESUS, TONY STREET ADDRESS 20231 SW 130 Court STREET ADDRESS 14332 SW 172 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 · ☐ Change ☐ Addition ☐ Delete TITL F TITLE NAME NAME HAVGEN, NORM STREET ADDRESS STREET ADDRESS 14643 SW 145 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 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.

TED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date