

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 747500

1. Entity Name

JERUSALEM CHURCH OF GOD SEVENTH DAY, INC.

Principal Place of Business

591 NW 35TH STREET  
MIAMI FL 33127

Mailing Address

PO BOX 014963  
FLAGLER STATION  
MIAMI FL 33101-4963

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGBEIN, LESLIE W.  
20801 BISCAYNE BLVD.  
SUITE 506  
MIAMI FL 33180

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME EUDOVIQUE, JOSEPH  
STREET ADDRESS 1301 NW 175TH TERRACE  
CITY-ST-ZIP MIAMI FL 33169

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME OSCAR, ULYSES  
STREET ADDRESS 825 NE 178TH TERRACE  
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME EUDOVIQUE, SHEILA  
STREET ADDRESS 1301 NW 175TH TERRACE  
CITY-ST-ZIP MIAMI FL 33169

TITLE ☐ Change ☒ Addition  
NAME Derrick E. John  
STREET ADDRESS 18948 NW 57th Ave #106  
CITY-ST-ZIP MIAMI, FL 33015

TITLE S/T ☐ Delete  
NAME JOHN, MIRIAM E  
STREET ADDRESS 2241 S SHERMAN CIRCLE 3413  
CITY-ST-ZIP MIAMAR FL 33025

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME SERIEUX, DEMETRIUS  
STREET ADDRESS 1385 NW 128TH ST  
CITY-ST-ZIP MIAMI FL 33167

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: MIRIAM E. JOHN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/09/00 305-919-5731  
Date Daytime Phone #

FILED  
Apr 14, 2000 8:00 am  
Secretary of State

04-14-2000 90072 034 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0882583 59-2026082 Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required