

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

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90075 026 ****61.25

DOCUMENT # 754071



1. Entity Name
HOLY TRINITY ROMANIAN ORTHODOX CHURCH OF FLORIDA, INC.

Principal Place of Business
**1850 SW 60TH TERRACE
MIRAMAR FL 33023**

Mailing Address
**1850 SW 60TH TERRACE
MIRAMAR FL 33023**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2655883**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VIORL P. DJULVEZ
2450 GARFIELD STREET
HOLLYWOOD FL 33020**

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. 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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DRE	<input type="checkbox"/> Delete
NAME	LIA, DUICA D	
STREET ADDRESS	6055 SW 19 STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CODREANU-CLAUDIU, T.D.	
STREET ADDRESS	1715 N 16 AVE APT #203	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	S	<input type="checkbox"/> Delete
NAME	BALTA, LOLITA	
STREET ADDRESS	32 SW 5TH ST	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	VD	<input type="checkbox"/> Delete
NAME	TIMIS, AUREL	
STREET ADDRESS	609 NE 14 AVE, APT #501	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	V	<input type="checkbox"/> Delete
NAME	BOLDIS, ALEX	
STREET ADDRESS	3484 SW 53RD COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	D	<input type="checkbox"/> Delete
NAME	SASU, DIMITRU VIORL	
STREET ADDRESS	1850 SW 60TH TERRACE	
CITY-ST-ZIP	MIRAMAR FL 33023	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 *Dimitru Viorel Sasu*

Apr 03/03 954 986-9866

CR2E037 (10/02)