

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

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90064 012 ****61.25

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1. Entity Name

SALVATION RADIO INC.



Principal Place of Business

**7615 SOUTHWICK STREET
ORLANDO FL 32818**

Mailing Address

**499 EAST 94TH STREET
BROOKLYN NY 11212-1643**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3670224**

Applied For

Not Applicable

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

**BASTIEN, BERY I
7615 SOUTHWICK STREET
ORLANDO FL 32818**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PCD						
	BASTIEN, ANTHONY A	458 EAST 94TH STREET	BROOKLYN NY				
	S						
	JULES, YVES	1111 OCEAN AVE	BROOKLYN NY				
	T						
	AUGSUTIN, DANIEL	3663 NOSTRAND AVE	BROOKLYN NY				
	D						
	AUGUSTIN, DANIEL	3663 NOSTRAND AVE	ORLANDO FL				
	TD						
	BASTIEN, BERY I	7615 SOUTH WICK STREET	ORLANDO FL				

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: *Signature of Anthony Bastien*

05/1/03 119.07(3)(i)

CR2E037 (10/02)