

FILED

03 MAR -7 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # F02000006080					
1. Entity Name LATIN IMPACT MINISTRIES, INCORPORATED					
Principal Place of Business 27430 SW 164TH CT HOMESTEAD, FL 33031		Mailing Address 27430 SW 164TH CT HOMESTEAD, FL 33031			
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 74-2687669	Applied For Not Applicable
5. Name and Address of Current Registered Agent BLACK, RUSSELL V 27430 SW 164TH CT HOMESTEAD, FL 33031				8. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of New Registered Agent				7. Name and Address of New Registered Agent	
Name				Name	
Street Address (P.O. Box Number is Not Acceptable)				Street Address (P.O. Box Number is Not Acceptable)	
City				City	
FL				Zip Code	
9. 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 _____ DATE _____					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 519.07(3)(f), 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 life empowered.					
SIGNATURE: <u>Russell V. Black</u> 2/25/03 305-245-6479					