

F14000003186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

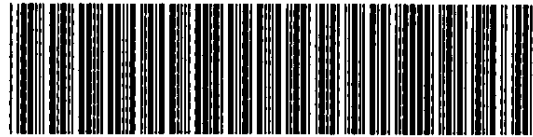
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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400260552814

05/27/14--01043--005 **78.75

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14 JUL 29 AM 7:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W14-33810

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: **IGREJA EVANGELICA CANAA, INC.**

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

ANTONIO CARLOS DAS CHAGAS

Name of Person

IGREJA EVANGELICA CANAA, INC

Firm/Company

2021 NW 45TH AVE

Address

COCONUT CREEK, FL 33066-1035

City/State and Zip Code

MARCOS@THEWAYGROUP.BIZ

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCOS REZENDE at (**954**) **427-4770**

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2014

ANTONIO CARLOS DAS CHAGAS
2021 NW 45TH AVE
COCONUT CREEK, FL 33066-1035

SUBJECT: IGREJA EVANGELICA CANAA, INC.
Ref. Number: W14000033810

14 JUL 29 PM 6:41
TALLAHASSEE, FL 32314

RECEIVED

60

We have received your document for IGREJA EVANGELICA CANAA, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 714A00011707

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. **IGREJA EVANGELICA CANAA, INC**

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. **NEW JERSEY**

(State or country under the law of which it is incorporated)

3. **20-5336356**

(FEI number, if applicable)

4. **11/07/2003**

(Date of Incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **06/01/2014**

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. **3521 NW 8TH AVE - POMPANO BEACH, FL 33064**

(Principal office address)

2021 NW 45TH AVE - COCONUT CREEK, FL 33066-1035

(Current mailing address)

8. **RELIGIOUS CHURCH**

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: **CSG- CAPITAL SERVICES GROUP INC**

Office Address: **446 W HILLSBORO BLVD**

DEERFIELD BEACH, Florida **33441**

(City)

(Zip Code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOSE Z. DIAS

Address: 204 THOMAS ST
NEWARK, NJ 07114

Vice President: ANTONIO CARLOS DAS CHAGAS

Address: 2021 NW 45TH AVE
COCONUT CREEK, FL 33066

Secretary: ANTONIO CARLOS DAS CHAGAS

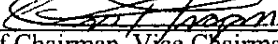
Address: 2021 NW 45TH AVE - COCONUT CREEK, FL 33066

Treasurer: _____

Address: _____

14 JUL 29 AM 7:29
SECRETARY
TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. V.PRESIDENT / SECRETARY
(Typed or printed name and capacity of person signing application)

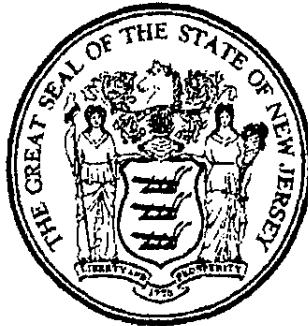
NEW JERSEY DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
CERTIFICATE OF REINSTATEMENT - ANNUAL REPORTS

IGREJA EVANGELICA CANAA, INC.

0100914966

A NON PROFIT CORPORATION

WHEREAS the above-named business entity did on the 10th day of December, 2013, satisfy all requirements for reinstatement as set forth in the laws of this State, I, the Treasurer of the State of New Jersey, do hereby issue this certificate authorizing the same to continue its business and resume the exercise of its functions.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
10th day of December, 2013

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

Andrew P Sidamon-Eristoff
State Treasurer

Certification # 130467285

Verify this certificate at

https://www1.state.nj.us/TYTR_StandingCert/ISP/Verify_Cert.jsp

14 JUL 29 AM 7:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA