

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2002 8:00 am
Secretary of State

01-15-2002 90051 031 ****70.00

DOCUMENT # N00000001552

1. Entity Name

CHRIST APOSTOLIC CHURCH OF HOLLYWOOD INC.

Principal Place of Business

Mailing Address

~~3951 SW 141 AVE.
MIRAMAR FL 33027~~

~~3951 SW 141 AVE.
MIRAMAR FL 33027~~

**16359 N.W. 57th Ave
Miami-Lakes, Fla 33014**

**16359 N.W. 57th Ave
Miami-Lakes, Fla 33014**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3621729

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ADEIFE, GABRIEL
3951 SW 141 AVE.
MIRAMAR FL 33027**

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 Delete
D
 NAME **ADEIFE, CAROLINE**
 STREET ADDRESS **3951 SW 141 AVE.**
 CITY-ST-ZIP **MIRAMAR FL 33027**

TITLE Change Addition
 NAME **CHARLES OBASUYI**
 STREET ADDRESS **14699 N.W. 6th Ave #239**
 CITY-ST-ZIP **Miami Lakes FL 33161**

TITLE Delete
D
 NAME **ADEIFE, GABRIGE**
 STREET ADDRESS **3951 S.W. 141 AVE.**
 CITY-ST-ZIP **MIRAMAR FL 33027**

TITLE Change Addition

TITLE Delete
SD
 NAME **ENORAKHARE, LAWRENCE**
 STREET ADDRESS **16359 N.W. 57TH AVE.**
 CITY-ST-ZIP **MIRAMAR LF**

TITLE Change Addition

TITLE Delete
D
 NAME **USIABULU, BASIL**
 STREET ADDRESS **14930 S SPUR DRIVE**
 CITY-ST-ZIP **NORHT MIAMI FL 33161**

TITLE Change Addition

TITLE Delete
J. ABAS

TITLE Change Addition

TITLE Delete

TITLE Change Addition

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: **GABRIEL ADEIFE**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-07-02
 Date Daytime Phone #

CR2E037 (9/01)