2001 UNIFORM BUSINESS REPORT (UBR)						FILED			
DOCUMENT # N0000001744 1. Entity Name STORM MINISTRY, INC.						May 01, 2001 08:00 AM Secretary of State			
Principal Place 551 NORTHWE SUITE B 404 PLANTATION 33317	e of Business EST 42ND AVENUE FL	Mailing Add 551 NORTHW SUITE B 404 PLANTATION 33317	EST 42ND AVENUE	- FL	-				
	ace of Business		· ·						
Suite, Apt. #, etc. Suite, Apt. #, etc.			pt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State	9	City & S	itate		4. FEI Numb	per		plied For t Applicable	
Zip	Country	Zip		Country	5. Certificat	e of Status Desired X	\$8.75 Add	litional	
	6. Name and Address of	Current Registered Ag	ent		7. Name an	d Address of New Registered	· · · · · · · · · · · · · · · · · · ·	-	
SPIEGEL &	utrera, p.a.		·	Name					
343 ALMERIA AVENUE				Street A	ddress (P.O. Box Numb	per is Not Acceptable)		-	
CORAL GA		FL							
33134 US					City FL Zip Code				
8. The above	named entity submits this stat	tement for the purpose o	of changing its req	gistered office or	registered agent, or be	oth, in the state of Florida.	—— \		
SIGNATURE						05/0	1/2001		
_	Signature, typed or printed name of regis	tered agent and title if applicable	, (NOTE: Re	egistered Agent signate	ure required when reinstating)	DATE			
	THE HOUSE								
	FEE IS \$61.25	Trust	tion Campaign Fi t Fund Contribution		\$5.00 May Be Added to Fees	Make Check Departmen			
	FEE IS \$61.25	to 1 1 1 4			Added to Fees		nt of State		
	FEE IS \$61.25	Trusi AND DIRECTORS		on. 🗆	Added to Fees	Departmen	nt of State	10	
10.	FEE IS \$61,25 OFFICERS	Trusi AND DIRECTORS	t Fund Contributio	on. 🗆	Added to Fees	Departmen	nt of State	10	
10. TITLE NAME STREET ADDRESS	OFFICERS TD USHERWOOD DAWN 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE	t Fund Contributio	11. TITLE NAME STREET ADDRESS	Added to Fees	Departmen	nt of State	10 Addition	
10. TITLE NAME	FEE IS \$61.25 OFFICERS TD USHERWOOD DAW	Trust AND DIRECTORS NETTE VENUE FL	□ Delete	11. TITLE NAME	Added to Fees	Departmen	nt of State	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS TD USHERWOOD DAWY 551 NORTHWEST 42ND AV PLANTATION SD	Trust AND DIRECTORS NETTE VENUE FL	t Fund Contributio	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Departmen	nt of State	10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS TD USHERWOOD DAWY 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA	Trust AND DIRECTORS NETTE VENUE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Departmen	DIRECTORS IN Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS TD USHERWOOD DAWY 551 NORTHWEST 42ND AV PLANTATION SD	Trust AND DIRECTORS NETTE VENUE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Departmen	DIRECTORS IN Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS TD USHERWOOD DAW! 551 NORTHWEST 42ND A' PLANTATION SD JAMES LINA 551 NORTHWEST 42ND A' 551 NORTHWEST 42ND A'	AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Departmen	DIRECTORS IN Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AT PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AT PLANTATION PD WRIGHT BELINDA	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust TAND DIRECTORS NETTE VENUE FL VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Added to Fees	Departmen	DIRECTORS IN Change Change	10 Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust TAND DIRECTORS NETTE VENUE FL VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317 Delete	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Departmen	DIRECTORS IN Change Change Change	10 Addition Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust TAND DIRECTORS NETTE VENUE FL VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317 Delete	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Departmen	DIRECTORS IN Change Change Change	10 Addition Addition Addition	
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Tend Contribution Delete 33317 Delete 33317 Delete 33317 Delete Delete	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Departmen	Change Change Change	10 Addition Addition Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS TD USHERWOOD DAWI 551 NORTHWEST 42ND AV PLANTATION SD JAMES LINA 551 NORTHWEST 42ND AV PLANTATION PD WRIGHT BELINDA 551 NORTHWEST 42ND AV	Trust AND DIRECTORS NETTE VENUE FL VENUE FL	Delete 33317 Delete 33317 Delete 33317 Delete	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Departmen	DIRECTORS IN Change Change Change	10 Addition Addition Addition	

12. I hereby certify that the information supplied with this filling 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: _

Lina James

on the on the Secretary the second of the se

SD

05/01/2001