

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002119

FILED
Apr 15, 2009
Secretary of State

Entity Name: ROMANIAN CHRISTIAN CHURCH INC.

Current Principal Place of Business:

1101 SW 49TH AVENUE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

1101 SW 49TH AVENUE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 65-0992734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUSCAS, AUREL
4711 CLEVELAND ST.
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

COLTEA, EMIL
2509 NE 2ND STR.
POMPANO BEACH, FL 33062 US

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: EMIL COLTEA

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AUREL, DR. PUSCAS
Address: 4711 CLEVELAND STR
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD () Delete
Name: CRISTEA, MIORICA
Address: 8125 S MADISON LAKES CIR.
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: LAZUREANU, D. FLORIN
Address: 3251 SW 53RD ST
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S () Delete
Name: BUMBU, AUREL C
Address: 3960 E. LAKE ESTATES DR
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PAST (X) Change () Addition
Name: COLTEA, EMIL PASTOR
Address: 2509 NE 2ND STR.
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD (X) Change () Addition
Name: CRISTEA, MIORICA TREASUR
Address: 8125 S MADISON LAKES CIR.
City-St-Zip: DAVIE, FL 33328

Title: D (X) Change () Addition
Name: LAZUREANU, D. FLORIN DEACON
Address: 3251 SW 53RD ST
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S (X) Change () Addition
Name: NITA, ION, DAN C SECRETA
Address: 195 GEORGIA AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMIL COLTEA

PAST

04/15/2009

Electronic Signature of Signing Officer or Director

Date