

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003778

FILED
Aug 17, 2004
Secretary of State

Entity Name: JOSE WELLINGTON BEZERRA DA COSTA BIBLE COLLEGE, CORP.

Current Principal Place of Business:

3990 N FEDERAL HWY
LIGHT HOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

3990 N FEDERAL HWY
LIGHT HOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 52-2233144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
3929 N FEDERAL HWY
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FREIRE DA COSTA, JOEL REV
Address: 12823 HIGHLAND CIR
City-St-Zip: BOCA RATON, FL 33428

Title: VD () Delete
Name: PEDRO, NATHANAEL
Address: 390 PALMETRO PARK DR, BLDG A, #209A
City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete
Name: VASCONCELOS, JOSE A REV
Address: 3450 BLUE LAKE DR, #306
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD () Delete
Name: ALVES DUTRA, JADER REV
Address: 4128 E RIDGE CIR
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOEL COSTA

PD

08/17/2004

Electronic Signature of Signing Officer or Director

Date