

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004468

FILED  
May 08, 2003  
Secretary of State

**Entity Name:** CHRISTIAN CHARITY SPIRITIST CENTER, INC.

**Current Principal Place of Business:**

1500-C E ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

1500-C E ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANTO, MARCELO  
8288 BOCA RIO DRIVE  
BOCA RATON, FL 33433 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: SANTO, MARCELO  
Address: 8288 BOCA RIO DRIVE  
City-St-Zip: BOCA RATON, FL 33433

Title: VD ( ) Delete  
Name: HADDAD, CARLOS  
Address: 693 NW 46TH AVE  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TD ( ) Delete  
Name: FREITAS, AUGUSTO  
Address: 856 CRYSTAL LAKE DR  
City-St-Zip: DEERFIELD 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:

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: MARCELO SANTO

PD

05/08/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date