2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE: 쓰

Apr 23, 2004 8:00 am Secretary of State DOCUMENT # N01000000176 1. Entity Name 04-23-2004 90238 005 ****70 00 CHRISTIAN UNION CHURCH, INC. Principal Place of Business Mailing Address **3400122** 441 NE 3RD AVE FORT LAUDERDALE FL 33304 2075 NW 46 AVENUE LAUDERHILL FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-1080224 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Toseph HANOCK JULMISTE, BERNARD Street Address (P.O. Box Number is Not Acceptable) 2720 S OAKLAND FOREST DR APT 703 FT LAUDERDALE FL 33309-7528 bring Lakes Drive 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition HENOCK, JOSEPH NAME NAME 8811 SPRING LAKES DRIVE STREET ADDRESS STREET ADDRESS SUNRISE FL 33351 CITY-ST-ZIP CITY - ST- 7/P VD ☐ Delete ☐ Change TITLE TITLE Addition MACE, PIERRE NAME NAME 225 SW 12 AVE., APT# 2 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP TITLE _ .Delete _ ___ Change ____ _ Addition _ EXILUS, JEAN CLAUDE NAME NAME STREET ADDRESS 2907 NW 56 AVE., APT F-2 STREET ADDRESS FORT LAUDERDALE FL 33323 CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition PAULIMARIE M 2075 NW 46 AVE, \$101 I LAUDETHILL FL 33313 (Concet PAUL, MARIE M NAME 2095 NW 46 AVE., #101-L STREET ADDRESS FORT LAUDERDALE FL 33313 CITY-ST-7IP CITY-ST-ZIP MGR Delete Change TITLE TITLE ☐ Addition NAZAIR, ERMITA NAME 4200 NW 34 WAY STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED