

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90153 040 ****61.25

DOCUMENT # NO1000000332

1. Entity Name
AGAPE BRAZILIAN MINISTRY, INC.



Principal Place of Business
**1010 E SAMPLE RD
POMPANO BEACH FL 33064**

Mailing Address
**1010 E SAMPLE RD
POMPANO BEACH FL 33064**

2. Principal Place of Business

2951 N. Powerline Rd
Suite, Apt. #, etc.

3. Mailing Address

2951 N. Powerline Rd
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State Pompano Beach - FL		City & State Pompano Beach - FL		4. FEI Number 65-1066077	Applied For <input type="checkbox"/> Not Applicable
Zip 33069	Country	Zip 33069	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DE LIMA, NELIS
6199 NAVAJO TERR
MARGATE FL 33063**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE LIMA, NELIS 6199 NAVAJO TER MARGATE FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD De Lima, Nelis 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BUARQUE, ROSELIANE 6199 NAVAJO TER MARGATE FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Buarque, Roseliane 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERLY, ROSEMBERG 4375 SW 10 PL, #305 DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Verly, Rosemberg 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARRETO, RICARDO 3107 NW 5 TER, #4 POMPANO BEACH FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Barreto, Ricardo 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALAMO, MARLUCIA 1060 CRISTAL LAKE BLVD, #403 POMPANO BEACH FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Alamo, Marlucia 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DA SILVA, VIVIAN 681 NE 8 CT POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Da Silva, Vivian 2951 N. Powerline Rd Pompano Beach - FL - 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: **SIGNATURE REQUIRED**

03 3103 954 973 4610

CR2E037 (10/02)