2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 09, 2002 8:00 am Secretary of State

DOCUMENT # N01000002139 05-21-2002 91199 020 ****61.25 FUERUSALEM BOUND HOLINESS CHURCH INC. Principal Place of Business Mailing Address 2889 NW 14TH CT 2889 NW 14TH CT FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 38329 2. Principal Place of Business 2889 NW 144h (3. Mailing Address Z887 N DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Danie Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number SMART, DANIEL SR 1244 NW 1ST AVENUE FT LAUDERDALE FL 33311 City recentity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 \Box Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. President ☐ Delete TITLE TIT) E NAME NAME anich Smart STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 1244 NW 1St Ale CITY-ST-ZIP CITY-ST-ZIP - Change - - - Addition... Treasures ŤÍTĽE TITLE NAME NAME Macdene STREET ADDRESS STREET ADDRESS 43/13 NW 14MSt CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 reserver 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. changed, or on an attachmen

CITY-ST-ZIP

SIGNATURE: