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

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91525 024 ****70.00

DOCUMENT # N01000002377

1. Entity Name
GOD'S MOVE IN THE NATIONS MINISTRY INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
238 N.E. 1ST STREET	P.O. BOX 0532
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: COCONUT CREEK, FL
Zip: 33132 Country: U.S	Zip: 33097 Country: U.S

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1091665 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: AMANCIO G. DIAS FILHO

Street Address (P.O. Box Number is Not Acceptable): 5482 N.W 49TH CT.

City: COCONUT CREEK FL Zip Code: 33073

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: Amancio Gonçalves Dias Filho PRESIDENT. 04-15-2003

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

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

TITLE	P/S/C/MD
NAME	AMANCIO G. DIAS FILHO
STREET ADDRESS	5482 N.W 49TH COURT.
CITY-ST-ZIP	COCONUT CREEK, FL 33073
TITLE	V/T/MD
NAME	NEIDE A. SILVEIRA DIAS
STREET ADDRESS	5482 N.W 49TH COURT
CITY-ST-ZIP	COCONUT CREEK, FL 33073
TITLE	MD
NAME	CARLOS SANTOS
STREET ADDRESS	18136 CLEAR BROOK CIRCLE
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	D
NAME	FRANCISCO R. PEREIRA
STREET ADDRESS	5640 PACIFIC BLVD #1001
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	D
NAME	RITA V. DOS SANTOS
STREET ADDRESS	2131 SECOFFEE ST.
CITY-ST-ZIP	MIAMI, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Amancio G. Dias filho. 04 23 03 954650 9078

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Phone #