

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 05, 2002 8:00 am  
Secretary of State

02-05-2002 90023 046 \*\*\*\*\*70.00

DOCUMENT # N01000002750

1. Entity Name

EQUIPPING THE SAINTS MINISTRIES, INC.

Principal Place of Business

Mailing Address

941 NW 176TH TERR  
MIAMI FL 33169

941 NW 176TH TERR  
MIAMI FL 33169

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip  
33179

Country  
US

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANNA, FRANCINE  
941 NW 176TH TERR  
MIAMI FL 33169

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.

SIGNATURE

*Francine Hanna, Francine Hanna*

*1/10/02*

Signature, typed or printed name of registered agent and title if applicable.

(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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
HANNA, JOSEPH  
941 NW 176TH TERR  
MIAMI FL 33169

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
HANNA, GEORGIA  
1261 NW 171 ST  
MIAMI FL 33169

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition  
*SD Marilyn Martin  
8240 SW 41ST  
Miami, FL 33155*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
HANNA, JOSEPH H  
1261 NW 171ST ST  
MIAMI FL 33169

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
HANNA, FRANCINE  
941 NW 176TH TERR  
MIAMI FL 33169

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change 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:

*Joseph R. Hanna*

*01/10/02*

*305-249-2929*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)