

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000004239

FILED
Aug 11, 2003
Secretary of State

Entity Name: US HELP COALITION FAITH-BASED, INC.

Current Principal Place of Business:

6032 CRYSTAL VIEW DR.
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

6032 CRYSTAL VIEW DR.
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-3726837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSA, PAULO SERGIO
6032 CRYSTAL VIEW DR.
ORLANDO, FL 32819

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ROSA, PAULO SERGIO
Address: 6032 CRYSTAL VIEW DR.
City-St-Zip: ORLANDO, FL 32819

Title: DV () Delete
Name: ROSA, IRENE VANZO
Address: 6032 CRYSTAL VIEW DR.
City-St-Zip: ORLANDO, FL 32819

Title: DS () Delete
Name: DE PONTES, ANGELA M.B.
Address: 5164 CONROY RD., #1528
City-St-Zip: ORLANDO, FL 32911

Title: DT () Delete
Name: ROSA, MARIANGELICA M B
Address: 6032 CRYSTAL VIEW DR.
City-St-Zip: ORLANDO, FL 32819

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV2 () Change (X) Addition
Name: ROSA, BRUNO B
Address: 6032 CRYSTAL VIEW DR
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULO SERGIO ROSA

DP

08/11/2003

Electronic Signature of Signing Officer or Director

Date