

3/21

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

FILED
May 12, 2002 8:00 am
Secretary of State

03-26-2002 90012 036 ****61.25

DOCUMENT # NO10000004249

1. Entity Name

The Deer Christian Church**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

42 Homestead Blvd

Suite, Apt. #, etc.

3. Mailing Address

420 NW 15 St

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Homestead, FL 33030

City & State

Homestead, FL 33030

4. FEI Number

65-1034332

Applied For

Not Applicable

Zip

Country

33030

Zip

Country

330305. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name FRANK CHAVEZStreet Address (P.O. Box Number is Not Acceptable) 420 NW 15 StreetCity Homestead

FL

Zip Code 33030**DO NOT WRITE
IN THIS SPACE**

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

Frank Chavez

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

(NOTE: Registered Agent signature required when reinstating)

3/9/02

DATE

FEE IS \$61.25
Initial or Amended UBR9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	<u>PRESIDENT</u>
NAME	<u>Frank Chavez</u>
STREET ADDRESS	<u>420 NW 15 St</u>
CITY-ST-ZIP	<u>Homestead, FL 33030</u>

TITLE	<u>Secretary</u>
NAME	<u>Rosa Chavez</u>
STREET ADDRESS	<u>420 NW 15 St</u>
CITY-ST-ZIP	<u>Homestead, FL 33030</u>

TITLE	<u>DIRECTOR</u>
NAME	<u>Emilio CARDOSO</u>
STREET ADDRESS	<u>16240 SW 114 St</u>
CITY-ST-ZIP	<u>Miami, FL 33157</u>

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**DO NOT WRITE
IN THIS SPACE**

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:

Frank Chavez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/02

Date

Daytime Phone #

CR2E037B (12/01)