2002 UNIFORM BUSINESS REPORT (UBR)

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FILED Apr 29, 2002 8:00 AM Secretary of State

Entity Name: IGREJA EVANGELICA ASSEMBLEIA DE DEUS - MISSIONARIA, INC.

Current Principal Place of Business: New Principal Place of Business: 4591 N DIXIE HWY 4321 NE FIRST TERRACE POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 **Current Mailing Address: New Mailing Address:** 4591 N DIXIE HWY 4321 NE FIRST TERRACE POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 FEI Number: 65-1151379 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: DA CRUZ, JAIRO DA CRUZ, JAIRO 8 SE 19TH AVE APT # 7 4591 N DIXIE HWY POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 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: DA CRUZ, JAIRO 04/29/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DA CRUZ, JAIRO Name: Name: 8 SE 19TH AVE #7 Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition COELHO, RICARDO LUIZ Name: BARRETO, PAULO O Name: Address: 7501 E TREASURE DRIVE APT 3-K Address: 4755 S. FEDERAL HWY City-St-Zip: NORTH BAY VILLAGE, FL 33141 City-St-Zip: DEERFIELD BEACH, FL 33141 Title: () Delete Title: TDSD (X) Change () Addition SATIM, NEIVA EDIANA SATIM, NEIVA E Name: Name: 8 SE 19TH AVENUE #7 Address: Address: 8 SE 19TH AVENUE # 7 City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060 Title: SD (X) Delete Title: () Change () Addition Name: MACIEL, ANA ALICE Name: 430 SE 2ND AVE APT #E-25 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip:

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: DA CRUZ, JAIRO PD 04/29/2002