

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

FILED
May 30, 2002 8:00 am
Secretary of State

05-30-2002 91601 031 ****61.25

DOCUMENT # NO/000008026
1. Entity Name
THE REAL DEAL MINISTRIES, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1701 SW 2 street Suite, Apt. #, etc. #20		3. Mailing Address 1701 SW 2 street Suite, Apt. #, etc. #20	
City & State Fort LAUDERDALE, FL		City & State FTL, FL	
Zip 33312	Country Broward	Zip 33312	Country Broward

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1155970	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent Mercedes Brown-McVane Street Address (P.O. Box Number is Not Acceptable) 1701 SW 2 street #20	
City Fort Lauderdale	FL Zip Code 33312

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

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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE TD President	NAME mercedes brown mcVane
STREET ADDRESS 1701 SW 2 st # 20	CITY-ST-ZIP FTL FL 33312
TITLE TD Vice President	NAME Julian McVane
STREET ADDRESS 1701 SW 2 st # 20	CITY-ST-ZIP FTL FL 33312
TITLE TD Secretary	NAME Emma Johnson
STREET ADDRESS 1350 NW 56 ave	CITY-ST-ZIP Lauderhill, FL 33313
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

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TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

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IN THIS SPACE**

CR2E037B (12/01)

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: Mercedes Brown-McVane

5/23/02

954-467-7818