

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002146

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: BEHOLD THE POWER OF GOD CHRISTIAN MINISTRY, INC.

## Current Principal Place of Business:

1607 QUAIL DR, APT C-205  
W PALM BEACH, FL 33409

## New Principal Place of Business:

1024 INDIAN TRACE, SUITE 203  
W PALM BEACH, FL 33407 US

## Current Mailing Address:

1607 QUAIL DR, APT C-205  
W PALM BEACH, FL 33409

## New Mailing Address:

1024 INDIAN TRACE, SUITE 203  
W PALM BEACH, FL 33407 US

FEI Number: 04-3623763

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOGUEIRA, SANDRA  
1607 QUAIL DR, APT C-205  
W PALM BEACH, FL 33409

## Name and Address of New Registered Agent:

NOGUEIRA, SANDRA  
1024 INDIAN TRACE, SUITE 203  
W PALM BEACH, FL 33407 US

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: SANDRA NOGUEIRA

04/28/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NOGUEIRA, SANDRA  
Address: 1607 QUAIL DR, APT C-205  
City-St-Zip: W PALM BEACH, FL 33409

Title: VD ( ) Delete  
Name: CARVALHO, MARCIO  
Address: 4161 NW 8  
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete  
Name: CARVALHO, VERA  
Address: 4161 NW 8  
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD ( ) Delete  
Name: ZELUTINI, TEREZA  
Address: 62 MAYFLOWER AVE # 1 FLR  
City-St-Zip: NEW ROCHELLE, NY 10801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NOGUEIRA, SANDRA  
Address: 1024 INDIAN TRACE, SUITE 203  
City-St-Zip: W PALM BEACH, FL 33407 US

Title: VD (X) Change ( ) Addition  
Name: NOGUEIRA, JOAO B  
Address: 1024 INDIAN TRACE, SUITE 203  
City-St-Zip: W PALM BEACH, FL 33407

Title: SD (X) Change ( ) Addition  
Name: LOPES, LEIDMAR C  
Address: 1024 INDIAN TRACE, SUITE 203  
City-St-Zip: W PALM BEACH, FL 33407

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SANDRA NOGUEIRA

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date