## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000007325

FILED Mar 01, 2007 Secretary of State

Entity Name: UNITED CHRISTIAN ORGANIZATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 135 NE 151 STREET NORTH MIAMI, FL 33162 **Current Mailing Address: New Mailing Address:** 135 NE 151 STREET NORTH MIAMI, FL 33162 FEI Number: 02-0707238 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ST PHAR, ST LUC 135 NE 151 STREET NORTH MIAMI BEACH, FL 33162 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: ST PHAR ST LUC Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ST PHAR, ST LUC Name: Name: 135 NE151 STREET Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: Title: VD Title: ( ) Delete () Change () Addition GEORGES, GASPARD Name: Name: Address: 1059 NW 65 ST Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: Title: () Delete Title: () Change () Addition AMERTUS, HERIBERT Name: Name: Address: 1480 NE 151TH ST Address: City-St-Zip: NORTH MIAMI BEACH, FL 33161 City-St-Zip: ΑТ Title: ( ) Delete Title: (X) Change ( ) Addition Name: DOLCE, ADLANGE Name: DOLCE, ADLANGE 655 NE 149 ST APT 206 Address: 655 NE 149 ST APT 206 Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: MIAMI, FL 33161 Title: () Delete Title: AS (X) Change ( ) Addition PENCHINAT, FITO MARCIA, BLAIN Name: Name: 1059 NW 59TH ST 39 NE 50TH ST Address: Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33137 Title: () Delete Title: ( ) Change (X) Addition LOUISA, PONTHIEUX Name: Name: Address: Address: 7297 NW 2ND AVE MIAMI, FL 33127 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ST PHAR ST LUC PD 03/01/2007