2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0200009671

1. Entity Name

COMMUNITY CHRISTIAN CENTER IN THE APOSTLES DOCTR



Jun 02, 2003 8:00 am Secretary of State 06-02-2003 90196 040 ****61.25

FILED

INE, INC.

Principal Place of Business 9501 S.W. 175 TERR.

Mailing Address 9501 S.W. 175 TERR

MIAMI FL 331	77			FL 33177							
2. Principal Place of Business 3. N				Mailing Address							
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State			Cit	City & State			4. FEI Number Applied For Not Applied For Not Applicable				
Zip Country Zi			Zip)	Country		5. Certificate of Status Desired		\$8.75 Ad	\$8.75 Additional	
	nd Address of Curre	nt Registere	d Agent		J	7. Name and Addr	ess of New Regis	•	, -		
				<u> </u>	Name						
DURAN, JOHN A 16521 SW 144 CT. MIAMI FL 33177					Street	Street Address (P.O. Box Number is Not Acceptable)					
					City	City			FL Zip Coo	le	
	e named entity tions of register	submits this statement ed agent.	for the purpo	ose of changing its	registered office	or register	ed agent, or both, in t	he State of Florida.	l am familiar with,	and accept	
SIGNATURE .	Signature, typed or	printed name of registered age	ent and title if appl	licable. (NOTE	: Registered Agent sign	ature required	when reinstating)	<u> </u>	DATE		
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		Check Payable Department of		
10.		OFFICERS AND (DIRECTORS		11.		L ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTORS IN	J 10	
IITLE	PD	*	31112010110	☐ Delete	TITLE	D	BB/110110/0/1/1/102	o to orthograph	Change	Addition	
IAMÉ	DURAN, JO	HN A		D Delete .	NAME		, JOSE C		E Change	L Addition	
TREET ADDRESS					STREET ADDRESS	1202	3 5W 209 TE	MACE			
CITY-ST-ZIP	MIAMI FL 3	* *		,	CITY-ST-ZIP		1. FLORIDA 3		,		
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IAME	RUIZ, JOSE	n .		- Delete	NAME		RO, XAVIER		Change	Li Addition	
STREET ADDRESS	12023, SW				STREET ADDRESS	1209	1 5W 249 TE	MAACE		ł	
CITY-ST-ZIP	MIAMI FL 3		, ·		CITY-ST-ZIP	MIAN	NEFLORION 33	3032		{	
TITLE	TD	2111		☐ Delete ·	TITLE	, ,,	TAL SIMON DIE		☐ Change	Addition	
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TREET ADDRESS	12091 SW				STREET ADDRESS	1	MI, FLOILIDA 33				
CITY-ST-ZIP	MIAMI FL 3				CITY-ST-ZIP		,				
TTLE	SD	0002	· · ·	☐ Delete	TITLE				☐ Change	Addition	
IAME	ONOARO, O	CHRISTINA		Delete	NAME				change	LJ 7.ddittos:	
TREET ADDRESS	12091 SW				STREET ADDRESS					1	
ITY-ST-ZIP	MIAMI FL 3				CITY-ST-ZIP						
ITLE	D	700 <u>E</u>		Delete	TITLE	 	***		☐ Change	Addition	
IAME	PEREZ, JOF	RGE		Delete	NAME				ondage		
TREET ADDRESS		145 AVE. RD.			STREET ADDRESS	1				1	
ITY-ST-ZIP	MIAMI FL 3				CITY-ST-ZIP						
ITLE	LINDANI I E O	,,,,,,		☐ Delete	TITLE	1			☐ Change	☐ Addition	
AME				I Delete	NAME				☐ Ottalige		
TREET ADDRESS					STREET ADDRESS						
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l	L					1			_		

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 expowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

305-252-4947