

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90041 036 ****61.25

DOCUMENT # N17443

1. Entity Name

THE CORNERSTONE TELEVISION MINISTRY, INC.

Principal Place of Business

Mailing Address

3730 COCONUT CREEK PKWY
STE 190
COCONUT CREEK FL 33066
USPO BOX 935150A
MARGATE FL 33093-5150

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2733101

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VASQUEZ, ANTHONY G
3730 COCONUT CREEK PKWY
STE 190
COCONUT CREEK FL 33066

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW:
FEES IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME P
STREET ADDRESS CASTELLANUS, RICARDO C FR
CITY-ST-ZIP 3730 COCONUT CREEK PKWY, STE 190
COCONUT CREEK FL 33066TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME D
STREET ADDRESS WARREN, WALTER
CITY-ST-ZIP 7807 NW 68 TERRACE
TAMARAC FL 33321TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME T
STREET ADDRESS VASQUEZ, ANTHONY G
CITY-ST-ZIP 6161 COUNTRY FAIR CIR
BOYNTON BEACH FL 33437TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME D
STREET ADDRESS BYMEL, MARY
CITY-ST-ZIP 2118 NE 56TH PL
FT LAUDERDALE FL 33308TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☒ Delete
NAME SD
STREET ADDRESS KAYLE, MILDRED
CITY-ST-ZIP 1344 NW 4TH CT
BOCA RATON FLTITLE ☒ Change ☐ Addition
NAME Secretary
STREET ADDRESS MARIE J GENATUS
CITY-ST-ZIP 841 Lyons Rd # 24107
COCONUT CREEK FL 33063TITLE ☐ Delete
NAME D
STREET ADDRESS D'ANGELO, JOSEPH
CITY-ST-ZIP 1123 SW 5TH ST.
BOCA RATON FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ANTHONY G VASQUEZ

04/24/00

954-970-7766

Date

Daytime Phone #

CR2E037 (9/99)