

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33044

1. Entity Name

BRETHREN IN CHRIST CHURCH CORP.

**FILED**  
May 30, 2000 8:00 am  
Secretary of State

05-30-2000 90077 038 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
80 E. 10TH AVENUE  
HIALEAH FL 33010

Mailing Address  
80 E. 10TH AVENUE  
HIALEAH FL 33010-5139

2. Principal Place of Business

3. Mailing Address  
930 HIALEAH DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
#6

City & State

City & State  
HIALEAH, FL ~~33010~~

4. FEI Number  
23-0536540

Applied For  
Not Applicable

Zip

Country

Zip  
33010

Country  
DADE

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

DIAZ, NORMA  
902 E. 32ND STREET REAR  
HIALEAH FL 33010

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

41 E. 20 ST

City HIALEAH, FL Zip Code 33010

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:  
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
DIAZ, MIGUEL  
902 E. 32ND ST. REAR  
HIALEAH FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
41 E. 20 ST  
HIALEAH, FL 33010 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
PEREZ, REN J  
7201 W 29 WAY  
HIALEAH FL 33016 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HANES, EDUARDO  
8928 SW 150 AVE.  
MIAMI FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DIRECTOR  
DAVID H. RUGAMA  
1835 SW 9 ST #2  
MIAMI, FL 33135 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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

Miguel Diaz 5/14/00 305) 897-3408

Date

Daytime Phone #

CR2E037 (1/99)