

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

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90344 001 ***333.75

DOCUMENT # N43737

1. Entity Name

NEW BIRTH BAPTIST CHURCH, INC.



Principal Place of Business

13230 NW 7TH AVE.
N. MIAMI FL 33168-2804
US

Mailing Address

13230 NW 7TH AVE.
N. MIAMI FL 33168-2804
US

2. Principal Place of Business

2300 NW 135 ST

Suite, Apt. #, etc.

3. Mailing Address

2300 NW 135 ST

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

Miami FL

Zip

33167

Country

Zip

33167

Country

4. FEI Number **65-0269611**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**STARKE, LEONARDO
3340 MCDONALD ST
COURTYARD STE
COCONUT GROVE FL 33133**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **RUBUE, HOWARD**
STREET ADDRESS **5335 NW 188 ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☐ Delete
NAME **JACKSON, BRENDA**
STREET ADDRESS **13230 NW 7TH AVENUE**
CITY-ST-ZIP **MIAMI FL**

TITLE **VD** ☐ Delete
NAME **KELLY, JOHN**
STREET ADDRESS **5454 FLETCHER ST**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **D** ☐ Delete
NAME **BRYANT, MAE**
STREET ADDRESS **1000 NW 151ST ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE **P** ☐ Delete
NAME **CURRY, VICTOR T**
STREET ADDRESS **5037 COUNTRY BROOK DR**
CITY-ST-ZIP **COOPER CITY FL 33330**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

TITLE ☐ 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]*

4/28/03

205-685-3700

CR2E037 (10/02)