

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43851

1. Entity Name

"PHILADELPHIA" FIRST ROMANIAN PENTECOSTAL CHURCH

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90068 010 ****61.25

Principal Place of Business	Mailing Address
502 N 28TH AVE. HOLLYWOOD FL 33020	502 N 28TH AVE. HOLLYWOOD FL 33020-3811
2. Principal Place of Business	3. Mailing Address: 2735 LINCOLN ST.



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
		65-0303537	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	HOLLYWOOD FL.	<input type="checkbox"/>	
Zip	Country		
	33020 FL.		

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MICA, EUGENE, REVEREND 2735 LINCOLN ST HOLLYWOOD FL 33020	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 *Mica Eugene* DATE 2-23-2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HATEGAN, MONICA 1830 NE 124 ST N MIAMI FL 33181 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HATECAN MONICA 4025-JEFFERSON ST. HOLLYWOOD-FL 33020. <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MICA, EUGENE 2735 LINCOLN ST HOLLYWOOD FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HATEGAN, MARIUS 1830 NE 124ST N MIAMI FL 33181 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HATECAN MARIUS 4025-JEFFERSON ST. HOLLYWOOD-FL 33020 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MICA, PARASCHIVA 2735 LINCOLN STREET HOLLYWOOD FL 33202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Mica Eugene* REQUIRED MICA EUGENE 2-23-2000, 954-920-7938
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)