


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2007 08:00 AM
Secretary of State

DOCUMENT # N44281			
1. Entity Name FIRST HUNGARIAN UNITED CHURCH OF CHRIST OF MIAMI, INC.			
Principal Place of Business 2236 N.W. 14TH STREET. MIAMI FL 33125		Mailing Address 2236 N.W. 14TH STREET MIAMI FL 33125	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LUKACSI, LASZLO REV. 2236 N.W. 14TH STREET MIAMI FL 33125		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 _____ (NOTE: Registered Agent signature required when reinstating)			
Signature, typed or printed name of registered agent and title if applicable. DATE			
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LU LUKACSI, LASZLO REV. 2236 N.W. 14TH STREET MIAMI FL 33125 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	L000000651569 <input type="checkbox"/> Change <input type="checkbox"/> Addition 03/09/07-80012-022 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUKACSI, EVA REV 2236 N.W. 14TH STREET MIAMI FL 33125 <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	D MEZEY, JANOS 2403 ANTIGUA CIR 4F COCONUT CREEK FL 33066 <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	D MEZEY, MARGO 2403 ANTIGUA CIR 4F COCONUT CREEK FL 33066 <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	D TOTH, DEZSO 2353 N.W. 87TH DRIVE CORAL SPRINGS FL 33065 <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	D KISS, ELIZABETH 6773 SW 21 ST MIAMI FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition



1st MOORE CR2E037 (10/06)

4. FEI Number 58-2181634	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Rev. Laszlo Lukacsi* **REV. LASZLO LUKACSI** (305) 638-1631 02.25.07.