2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED **DOCUMENT # N47611** Apr 23, 2000 8:00 am Secretary of State 1. Entity Name NEW LIFE PENTECOSTAL CHURCH MIRACLE CENTER INC. 04-23-2000 90020 030 ****70.00 Principal Place of Business Mailing Address 2609 TAFT ST. 116 S. 61ST TERRACE -HOLLYWOOD FL 33023 HOLLYWOOD FL 33020-2946 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ADELEKAN, ADEMOLA 2609 TAFT ST. HOLLYWOOD FL 33020 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW: ~ Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition TITLE ☐ Delete TITLE NAME FALODUN, ISAAC NAME STREET ADDRESS STREET ADDRESS 201 SW 68 AVENUE CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33024 **FSD** TITLE Change ☐ Addition TITLE ☐ Delete AJAYI, WILLIAM R NAME NAME STREET ADDRESS STREET ADDRESS 1810 NW 119 ST CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33167 ☐ Addition ☐ Change TITLE SD □ Delete TITLE NAME ADELEKAN, ADEMOLA NAME STREET ADDRESS STREET ADDRESS 2609 TAFT ST. CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Addition TD ☐ Delete TITLE Change TITLE OLAJOYEGBE, OLUMUYIWA NAME NAME STREET ADDRESS 418 SOUTH RAINBOW DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete TIT1 F ☐ Change Addition TITLE NAME AKAHBI, COLLINS NAME STREET ADDRESS STREET ADDRESS 7221 GRANDVIEW BLVD. CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33023 TITLE Change ☐ Addition TITLE ☐ Delete NAME FAJIMOLU, STELLA O STREET ADDRESS 2740 SOMERSET DR., #4-409 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LAKES FL 33311 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 supplies entail 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 vustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if