

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49518

1. Entity Name

NEW REVELATION CHURCH OF C.M.A., INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 DEC -5 AM 11:28

Principal Place of Business

Mailing Address

27 NE 73RD ST  
27  
MIAMI FL 33138  
US

1201 SW 11TH AVE  
STE B  
DEERFIELD FL 33661  
US

2. Principal Place of Business

3. Mailing Address

*Miami*  
Suite, Apt. #, etc.

*1201 SW 11th Ave*  
Suite, Apt. #, etc.

*27*  
City & State

*D*  
City & State

*Miami* *Florida*

*Deerfield* *FL*

*33160*  
Zip

*Dade*  
Country

*33441*  
Zip

*Bra Ward*  
Country

4. FEI Number

65-0358403

Applied For

Not Applicable

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

CONSTANT JOSEPH, REV  
6201 SW 11TH AVE  
DEERFIELD FL 33661

Name *Rev. Constant Joseph*

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

*6201 SW 11th Ave*

City *Deerfield*

FL

Zip Code

*33441*

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 *Rev Constant Joseph*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*10/08/00*  
DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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  Delete  
NAME *D*  
STREET ADDRESS *ST VIL, FEQUIERE*  
CITY-ST-ZIP *255 NE 48 ST MIAMI FL*

TITLE  Change  Addition  
NAME *Miracia Louis*  
STREET ADDRESS *182 N Miami Av.*  
CITY-ST-ZIP *Miami FL 33160*

TITLE  Delete  
NAME *D*  
STREET ADDRESS *JUSTE, MICHEL L*  
CITY-ST-ZIP *19815 NW 10TH AVE MIAMI FL*

TITLE  Change  Addition  
NAME *Cyborin Ba Julien*  
STREET ADDRESS *471 N 171st Miami FL*  
CITY-ST-ZIP

TITLE  Delete  
NAME *T*  
STREET ADDRESS *ST VIL, FRANKLYN*  
CITY-ST-ZIP *1290 NW 146 ST DEERFIELD BEACH FL*

TITLE  Change  Addition  
NAME *Rosie Koel*  
STREET ADDRESS *340 N E 129 st Miami FL*  
CITY-ST-ZIP

TITLE  Delete  
NAME *S*  
STREET ADDRESS *JOSEPH, DELVA*  
CITY-ST-ZIP *1090 NW 132ND ST MIAMI FL*

TITLE  Change  Addition  
NAME *Delion Alexi*  
STREET ADDRESS *730 N E 187st Miami FL*  
CITY-ST-ZIP

TITLE  Delete  
NAME *C*  
STREET ADDRESS *PRUDENT, ELMITA*  
CITY-ST-ZIP *1892 NW 91 ST MIAMI FL*

TITLE  Change  Addition  
NAME  
STREET ADDRESS *500004726365*  
CITY-ST-ZIP *-12/14/01-01035-005*

TITLE  Delete  
NAME *C*  
STREET ADDRESS *TUSMA, MARCEL*  
CITY-ST-ZIP *1882 NW 91 ST MIAMI FL 33167*

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 REQUIRED *Constant Joseph, Pastor 10/08/00*

CR2E037 (5/00)