

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000000343

1. Entity Name

CHILDREN OF JESUS FOUNDATION, INC.

Principal Place of Business

14449 COUNTRY WALK DR
MIAMI FL 33186

Mailing Address

14449 COUNTRY WALK DR
MIAMI FL 33186-8104

2. Principal Place of Business

14711 SW 112TH TERRACE
Suite, Apt. #, etc.

3. Mailing Address

14711 SW 112TH TERRACE
Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0405076

Applied For

Not Applicable

Zip

33196

Country

USA

Zip

33196

Country

USA

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

VILLEGAS, HENRY A
14711 SW 112TH TERR
MIAMI FL 33196

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

Henry A Villegas HENRY A VILLEGAS

4-28-2000

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME VILLEGAS, HENRY A
STREET ADDRESS 14711 SW 112TH TERR
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

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

TITLE TD
NAME RODRIGUEZ, ARNOLDO REV.
STREET ADDRESS 13517 LA MIRADA CIRCLE
CITY-ST-ZIP WELLINGTON FL 33314 ☐ Delete

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

TITLE VD
NAME HOBBS, WILLIAM
STREET ADDRESS 2400 WARE DR
CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

Henry A Villegas HENRY A VILLEGAS

4/28/2000

305-388-3810

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)