NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 29, 1999 8:00 am
Secretary of State

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1. Corporation Name

CHURCH CEIFA, INC.

Principal Place of Business	Mailing Address
1008 E SAMPLE RD POMPANO BEACH FL 33064	1008 E SAMPLE RD POMPANO BEACH FL 33064

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 17 N.E 2ND AVE	26 P.O Box 1042	05/10/1993
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 65-0480005 ☐ Applied For ☐ Not Applicable
23 City & State DEERFIELD BEACH	28 City & State DEERFIELD BCH. FL.	5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required
24 Zip 33443 25 Country USA FLORIDA	29 Zip 33443-1042 30 Country USA.	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

DE CARVALHO, ELIEL
1010 EAST SAMPLE RD
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name DE CARVALHO, ELIEL

82 Street Address (P.O. Box Number is Not Acceptable) 1405 GULF STREAM CIR. # 201

83

84 City BRANDON FL 85 Zip Code 33511-2848

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE ELIEL F. DE CARVALHO Eliel F. DE CARVALHO 05/31/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DE CARVALHO, ELIEL 10328 BOCA ENTRADA BLVD #123 BOCA RATON FL 33428 NEW ADDRESS	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DE CARVALHO ELIEL 1405 GULF STREAM CIRCLE # 201 BRANDON. FL. 33511-2848 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DOS SANTOS, JOSE A 6345 NW 9 ST MARGATE FL 33063	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DELICERIO DE AQUIAR FONSECA 440 S.E 2ND AVE # C-3 DEERFIELD BEACH. FL. 33441 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD OLIVEIRA, ITAMAR 9270 S W 61ST WAY, APT C BOCA RATON FL 33428	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	ROBERTO NASCIMENTO 300 S.E 11TH STREET DEERFIELD BEACH. FL. 33441 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CASTRO, IVANEIDE 450 N W 20TH STREET, #309-E BOCA RATON FL 33431	☐ DELETE	4.1 TITLE / 4. 2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PINTO, JOEL G 450 N.W 20TH STREET, #309-E BOCA RATON FL 33431	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIEL F. DE CARVALHO RECEIVED 05/31/99 813-6898705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #