

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 06, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90166 038 \*\*\*\*61.25

DOCUMENT # N93000004235

1. Entity Name

Unity Of The Faith Ministries, Inc.



**DO NOT WRITE IN THIS SPACE**

**54052963**

2. Principal Place of Business

1125 NE 80th Street

Suite, Apt. #, etc.  
Suite #5

City & State

Miami, Florida

Zip  
33138

Country  
Dade

3. Mailing Address

P.O. Box 415160

Suite, Apt. #, etc.

City & State

Miami Beach, Florida

Zip  
33140

Country  
Dade

4. FEI Number

65-0437254

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Andrews, Grace C.

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

1125 NE 80th Street, Suite #5

City  
Miami

FL

Zip Code  
33138

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
Andrews, Apostle Garcia  
1125 NE 80th Street, Suite #5  
Miami, FL 33138

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVS  
Andrews, Grace Charmaine  
1125 NE 80th Street, Suite #5  
Miami, FL 33138

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Johnson, Kenneth George  
1515-NE-66th Street  
Miami, FL 33147

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
Harris, David Joseph, Jr  
1125 NE 80th Street, Suite #5  
Miami, FL 33138

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

*Grace C. Andrews*

SIGNATURE: Grace C. Andrews-Dir VP Secretary

05/01/04 (305) 754-7424

CR2E037B (12/02)