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NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

POCUMENT # N9400002391 (0)

## **FILED** Jun 18 1998 8:00am Secretary of State

| 1. Corporatio   | n Name  | (0)                                   |                                |                   |   |   |              |
|---|---|---------------------------------------|--------------------------------|-------------------|---|---|--------------|
| BRAZILIAN EVANGELICAL CHURCH, INC.  |   |                                       |                                |                   |   |   |              |
|   |   | ,                                     |                                | [                 | N I <b>ndinis</b> i aus laini aini salih anlih àsibi adb    |   |              |
| Didente el Dina   | - 10  | ha in a state of                      | <del></del>                    |                   |   |   |              |
| Principal Plac  | Mailing Address                                   |                                       |                                |                   |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |              |
| 5303-A E COLONIAL DR 5303-A E COLONIAL DR   |   |                                       |                                | Ì                 | 3. Date Incorporated or Qualified                           |   |              |
| ORLANDO FL 3  | 2807  | ORLANDO FL 32807                      |                                | 1                 | 05/09/1994  |   |              |
|   |   |                                       |                                | Ī                 | 4. FEI Number   | Ap                                      | plied For    |
|   |   |                                       |                                |                   | <del>59-3247813</del>                                       | No                                      | t Applicable |
| 2. Principal Piace of Business 21 4700 LINCOLN AVE. 26 3732 RVNN  |   |                                       |                                |                   | 5. Certificate of Status Desired                            | \$8.75                                  |              |
|   |   | 26 3732 RUNNI/<br>Suite, Apt. #, etc. | NG DEER DI                     | K.                | ·   | Fee Re                                  |              |
| Suite, Apt. #, etc. 27  |   |                                       | <del></del>                    |                   | 6. Election Campaign Financing Trust Fund Contribution      | \$5.00 N<br>Added to                    |              |
| City & Stat   | 0   | City & State                          |                                | $\longrightarrow$ | 7. Is this nonprofit corporation a homeow                   |   |              |
|   | ando, FL  | 28 ORLANDO, F                         | - L                            | j                 | Yes   | No No                                   | ır           |
| Zip   | Country   | Zip                                   | Country                        |                   | 8. This corporation owes or has paid the                    | current year Inti                       | angible      |
| 24 3ZB  |   |                                       | 10 USA                         |                   | Personal Property Tax due June 30.                          | Yes 🛚                                   | No           |
|   | 9. Name and Address of Curre                      | nt Registered Agent                   |                                |                   | <ol><li>Name and Address of New Register</li></ol>          | ed Agent                                |              |
| 81 Name   |   |                                       |                                |                   |   |   |              |
|   |   |                                       |                                |                   | s (P.O. Box Number is Not Acceptable)                       |   |              |
| 5303-A E  |   |                                       |                                |                   |   |   |              |
| ORLAND  | O FL 32807  |                                       | 83                             |                   |   |   |              |
|   |   |                                       | 84 City                        |                   |   | 85 Zip (                                | Code         |
| 41 Durana   | to the provisions of Continue C17 OF              | 00 and C17 1500 Florida Ptotuta       | Abo about someth               |                   |   | L B Zp                                  |              |
| 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. |   |                                       |                                |                   |   |   |              |
| agent la  | m familiar with, and accept the oblig             | gations of, Section 617.0503, Flori   | ida Statutes.                  |                   |   |   |              |
| SIGNATURE   | Signature, typed or printed name of registered ag | pont and title if applicable (NOTE:   | Registered Agent signature     | required          | when reinstating) DAT                                       |   |              |
| 12.   | ~ <del></del>                                     | ND DIRECTORS                          | 13.                            |                   | ADDITIONS/CHANGES TO OFFICERS A                             | ND DIRECTOR                             | S IN 12      |
| TITLE   | Ō   | <b>X</b> ) DELETE                     | 1.1 TITLE                      | D                 | 1 1   | ☐ Change                                | Addition     |
| NAME  | Moreira, Jonathas D                               | ,                                     | 1.2 NAME                       | U                 | JESLEY G. PORTO/PORT<br>23 S. KIRKMAN RD. # 181             | O, WESLEY                               | 16           |
| STREET ADDRESS  | 499 STATE ROAD 434, SUITE                         | 1073/75                               | 1.3 STREET ADDRESS             | 2                 | 23 S. KIRKMAN RD. # 101                                     | •                                       | <i>'</i>     |
| CITY-ST-ZIP   | ALTAMONTE SPRINGS FL                              |                                       | 1.4 CITY - ST - ZIP            | OR                | LANDO, FL 32811   |   |              |
| TITLE   | PD  | DELETE                                | 2.1 TITLE                      | 1                 |   | L Change                                | ☐ Addition   |
| NAME  | NORBERTO, JED                                     |                                       | 2.2 NAME                       |                   |   |   |              |
| STREET ADDRESS  | \$732 RUNNING DEER                                |                                       | 2.3 STREET ADDRESS             | ļ                 |   |   |              |
| CITY-ST-ZIP   | ORLANDO FL 32829                                  | <b>▼</b> DELETE                       | 2.4 CITY-ST-ZIP<br>3.1 TITLE   | <i>(</i> , )      |   | Change                                  | Addition     |
| NAME  | <b>\$D</b><br><b>\$O</b> rger, Nilda s            | STI Detrue                            | 3.1 THEE                       | SD                | molena Doron  |   | ATT LOCITION |
| STREET ADDRESS  | 2120 MO-HO DRIVE                                  |                                       | 3.2 NAME<br>3.3 STREET ADDRESS | <u>w</u>          | ESLEY G. PORTO<br>23 S. KIRKMAN RD #10.<br>CLANDO, FL 32811 | 1                                       |              |
| CITY+ST-ZIP   | ORLANDO FL  |                                       | 3.4. CITY-ST-ZIP               | no                | CANDO EL PERIL  |   |              |
| TITLE   | VPD   | DELETE                                | 41 TITLE                       | VPI               | )   | Change                                  | Addition     |
| NAME  | MELLO, LILIAN                                     |                                       | 4 2 NAME                       | 1 NA              | WEAMA JR.   |   |              |
| STREET ADORESS  | 1812 CONCORD DRIVE                                |                                       | 4.3 STREET ADDRESS             |                   | IN WELLINGTON CR. #Z  | pl                                      |              |
| CITY-ST-ZIP   | APOPKA FL   |                                       | 4.4 City-St-ZiP                | Ki                | VI GAMA JR.<br>17 WELLINGTON CR. #2<br>SSEE MEE, FL 3474    | Ĺ                                       |              |
| TITLE   | TD  | DELETE                                | 5.1 TITLE                      |                   |   | Change                                  | Addition     |
| NAME  | NORBERTO, HELENA                                  |                                       | 5.2 NAME                       |                   |   |   | [            |
| STREET ADDRESS  | 3732 RUNNING DEER                                 |                                       | 5.3 STREET ADDRESS             |                   |   |   |              |
| CITY - ST - ZiP   | ORLANDO FL 32829                                  |                                       | 5.4 CITY - ST - ZIP            |                   |   |   |              |
| TITLE   |   | ☐ DELETE                              | 6.1 TITLE                      |                   |   | Change                                  | Addition     |
| NAME  |   |                                       | 6.2 NAME                       |                   |   |   |              |
| STREET ADDRESS  |   |                                       | 6.3 STREET ADDRESS             |                   |   |   |              |
| CITY-ST-ZIP   |   | MI ALS ACCURATE                       | 6.4 CITY - ST - ZIP            |                   | ection 119.07/3VI) Florida Statutas I furtho                |   | 1-4          |
|   |   |                                       |                                |                   |   |   |              |

Indicated on this annual report or supplied with this hing does not quality for the exemption stated in Section 119-07(3)(1). Florida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 Statules; and that my name appears in Block 12 or Block 13 if changes, over an attachylent with an address.