

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 14 PM 2: 26

DOCUMENT # N94000004868 (5)

1. Corporation Name

**FIRST BRAZILIAN BAPTIST CHURCH OF SOUTH FLORIDA,
INC.**

Principal Place of Business

Mailing Address

**1101 NE 33RD ST.
POMPAÑO BEACH FL 33064**

**1101 NE 33RD ST.
POMPAÑO BEACH FL 33064**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1994

3a. Date of Last Report

4. FEI Number

65-0532888

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**REZENDE, MARCOS
1101 NE 33RD ST.
POMPAÑO BEACH FL 33064**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
REZENDE, MARCOS
4953 E. LAKES DR.
POMPAÑO BEACH FL 33064**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
VALVERDE, JAIRO
843 RICH DR. #203
DEERFIELD BEACH FL 33441**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
FIOROTTI, SAULO
228 NE 45TH ST.
POMPAÑO BEACH FL 33060**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

**SOUZA, JULIO
941 NE 169 ST # 204
N. MIAMI BEACH - 33162**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SALUM, MAHIBA
970 NE 36TH ST.
FT. LAUDERDALE FL 33334**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☒ Change ☐ Addition

**BOHRER, CLAUDIA
2731 N. ANDREWS #B.8
FT. LAUDERDALE - FL - 33311**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ANDRADE, SONIA
9837 THREE LAKES CIR. #1E
BOCA RATON FL 33428**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☒ Change ☐ Addition

**SALUM, MAHIBA
970 NE 36TH ST
FT. LAUDERDALE - FL - 33334**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 917, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF GIVING OFFICER OR DIRECTOR

02/02/95

(305) 570-1273

(150)

Daytime Phone #