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Jan 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000004868 (5)**

1. Corporation Name

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

Principal Place of Business

Mailing Address

1101 NE 33RD ST.
POMPANO BEACH FL 33064

1101 NE 33RD ST.
POMPANO BEACH FL 33064

3. Date Incorporated or Qualified

10/03/1994

4. FEI Number

65-0532888

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

TITLE ☐ DELETE
NAME T
STREET ADDRESS VALVERDE, JAIRO
CITY-ST-ZIP 843 RICH DR. #203
DEERFIELD BEACH FL

TITLE ☒ DELETE
NAME T
STREET ADDRESS PEGAS, MARCOS ALFANO
CITY-ST-ZIP 1101 NE 33RD STREET
POMPANO BEACH FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS BOHRER, CLAUDIA
CITY-ST-ZIP 2731 N ANDREWS #B8
FT. LAUDERDALE FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS SALUM, MAHIBA
CITY-ST-ZIP 970 NE 36TH ST
FT LAUDERDALE FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS FIGUEIREDO, ALEX
CITY-ST-ZIP 523 TIVOLI TRACE, #204
DEERFIELD BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME T
3.3 STREET ADDRESS JOSE H. MANABUK AGUIAR
910 SW 21 STREET
3.4 CITY-ST-ZIP BOCA RATON - FL-33486

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

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

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

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.

SIGNATURE:

Mahiba Salum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0025484

CR2E037 (10/97)