

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90012 041 ****61.25

DOCUMENT # N95000001243

1. Entity Name

J.J. MINISTRIES INC.

Principal Place of Business

Mailing Address

**19730 S.W 12TH STREET
 PEMBROKE PINES FL 33029**

**P O BOX 821867
 PEMBROKE PINES FL 33082-1867
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0565063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICE, BILL
 19730 S.W. 12TH ST.
 PEMBROKE PINES FL 33029**

Name

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

City

FL

Zip Code

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.

SIGNATURE *Bill Rice - Bill Rice*

4-25-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME KELLY, JOAN
 STREET ADDRESS 19730 SW 12TH ST.
 CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE P/D ☒ Change ☐ Addition
 NAME morales, JOAN
 STREET ADDRESS 604 S.W 75 TERR.
 CITY-ST-ZIP North Lauderdale, FL. 33068

TITLE D ☐ Delete
 NAME RICE, BILL
 STREET ADDRESS 19730 SW 12TH ST
 CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE V. ☐ Change ☒ Addition
 NAME morales, FRANCISCO
 STREET ADDRESS 604 S.W. 75 TERR.
 CITY-ST-ZIP North Lauderdale, FL. 33068

TITLE D ☒ Delete
 NAME PARKER, DAVID
 STREET ADDRESS 1470 NW 55 AVE
 CITY-ST-ZIP LAUDERHILL FL 33313

TITLE D. ☐ Change ☒ Addition
 NAME KING, ELIZABETH, Director
 STREET ADDRESS 8021 Santa Fe Trail
 CITY-ST-ZIP Boca Raton, FL 33487

TITLE D ☐ Delete
 NAME PUERTO, ELIZABETH
 STREET ADDRESS 2128 N.W. 43RD ST.
 CITY-ST-ZIP MIAMI FL 33142

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOAN MORALES
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-25-2000 954-718-1090