2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002888

1. Entity Name

WORLD-WIDE MISSIONARY AND EVANGELISTIC ADVANCE, INC.

Principal Place of Business 11300 OLD HAVOR RD ORLANDO FL 32837 US			Mailin	ig Address		1						
				OX 620892 DO FL 32862			ยิกกรกษาก					
O Defendant	Diagonal Dunia		0 14-1	Hinn Astalana				<u> </u>				
2. Principal Place of Business 5934 Bent Pine Dr			3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State Orlando Fl.			City & State			4	4. FEI Number Applied For Not Applicable					
Zip Country			Zij		Country	ntry			\$2			
32822 Orange]	,	5. Certificate of Status Desired S8.75 Additional Fee Required						
6. Name and Address of Current Registe				ed Agent		_7.	. Name and Addre	ss of New Registe	red Ag	ent		
				*	Name	وليجوان واسيي		همان ماکسات کا	_ ->	-,	:	
ORTIZ, REBECCA				Street Address			s (P.O. Box Number is Not Acceptable)					
11300 OLD HAVOR RD						-	· <u></u>					
ORLANDO FL 32862										75-0-4		
					City				FL	Zip Code	Э	
8. The above	e named entity	submits this statement for	or the purp	ose of changing its r	egistered office or	r registered	agent, or both, in th	e state of Florida.				
ماري		M. A.										
SIGNATURE.								3-	6-02	2		
SIGNATURE	Signatur typed o	or printed name of prigistered agent	t and title if app	olicable. (NOTE:	Registered Agent signatu	ure required whe	n reinstating)		ATE			
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1	EU E NOW.	FEE IS \$61.25	ľ	9. Election Cam	paign Financing	_ \$5	5.00 May Be	Make Cl	heck P	ayable	to	
'				Trust Fund Co	ontribution.	☐ Ad	Ided to Fees	Depart	tment	of State		
			BECTORS					<u> </u>				
10. TITLE	р	OFFICERS AND DI	RECTORS		11.	ADD	Ided to Fees	<u> </u>	D DIREC	CTORS IN		
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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.

FILED

03-22-2002 90021 048 ****61.25

Mar 22, 2002 8:00 am § Secretary of State

(407) 816-1395