2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 29, 2000 8:00 am
Secretary of State
05-24-2000 90052 032 ****70.00

DOCUMENT # N95000003167

1. Entity Name

INDIGENOUS FAITH OF AFRICA, INC.

Principal Place of Business	Mailing Address
166 NW 48 ST MIAMI FL 33127	166 NW 48 ST MIAMI FL 33127-2418

[redacted]

DO NOT WRITE IN THIS SPACE

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 65-0682675 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALUKO, CHIEF A
166 NW 48 ST
MIAMI FL 33127

7. Name and Address of New Registered Agent

Name: CHIEF (BABALAWO) ADEDOJA E. ALUKO
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 _____
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ~~FERNAND, SOLOMAN~~ ~~1235 NE 201 TERR~~ ~~MIAMI FL 33189~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT HORACE BATISTE 1619 BARONNE ST. NEW ORLEANS, LA 70113	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOVE, NUBIA 1007 WATER AVE SAVANNAH GA 31404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALUKO, CHIEF A 166 NW 48TH ST MIAMI FL 33127	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS ~~ALBURY, ADEYELA 9~~ ~~166 NW 48 ST~~ ~~MIAMI FL 33127~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	NOKIA BOWLING 165 NW 193RD ST MIAMI, FL 33167	☐ Change ☑ Addition SECRETARY
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ TREASURER RAYMOND, JAMES ~~115 NW 197 CT~~ 165 NW 193RD ST MIAMI FL ~~33169~~ 33167	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, DARRYL RTE 3 BOX 3163 C-15 TOWNSEND GA 31331	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: SIGNATURE REQUIRED Chief Adedoja Aluko 6/15/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #