

2007 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000003762

1. Entity Name
ASSEMBLY OF GOD MISSION PHILADELPHIA CORP.

Principal Place of Business
901 E PALMETTO PARK RD
BOCA RATON, FL 33486

Mailing Address
6610 FERN STREET
MARGATE, FL 33063

FILED

2007 OCT -1 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
Suite, Apt. #, etc.
297 Kingstone Drive

3. Mailing Address
Suite, Apt. #, etc.
297 Kingstone Drive

DO NOT WRITE IN THIS SPACE

City & State
Fort Myers

City & State
Fort Myers

4. FEI Number
65-0605258

Applied For
Not Applicable

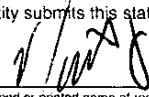
5. Certificate of Status Desired \$8.75 Additional Fee Required

Zip Country Zip Country
33905 USA 33905 USA

6. Name and Address of Current Registered Agent
SACRAMENTO, PAULO LUCAS
901 E PALMETTO PARK RD
BOCA RATON, FL 33486

7. Name and Address of Now Registered Agent
Name
SACRAMENTO, PAULO LUCAS
Street Address (P O Box Number is Not Acceptable)
297 Kingstone Drive
City
Fort Myers FL Zip Code
33905

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  09/24/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

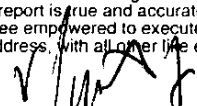
**FILE NOW:
FEE IS \$61.25**

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 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SACRAMENTO, PAULO LUCAS 6382 NW 36th AVE COCONUT CREEK, FL 33073 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800110516308 10/03/07--01012--008 **122.50
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CESAR DE SILVA, JULIA 3841 W HILLSBORO BLVD #A202 COCONUT GROVE FL 33073 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SACRAMENTO JUNIOR, PAULO LUCAS 13681 PARKCREST BLVD Fort Myers, FL 33912 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BARROS SILVEIRA, PEDRO ELIAS 22228 BOCA RANCHO DR BOCA RATON FL 33428 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BRANDAO, MARCOS SILVA 206 UTAH AVE Fort Myers, FL 33905 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FONTES, EDIVALDO 500 CRESTA CIR W PALM BEACH FL 33413 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SACRAMENTO, OSLAIR 6332 NW 36th AVE COCONUT CREEK, FL 33073 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 06-07

12. I Herby 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 qualified 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:  09/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

Sept 2007 OCT 24, 2007 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
REINSTATEMENT DEPARTMENT
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE - FL - 32314

To Whom It May Concern:

I would like to inform you that I am the president of a Non-Profit Corporation by the following name:

ASSEMBLY OF GOD MISSION PHILADELPHIA CORP
DOC. # N02000001761

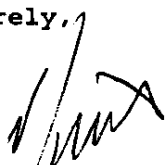
Our Ministry had its articles filed with Florida department of State-Division of Corporation on 08/08/1995.

We never received the first notice to renew the Name of our organization and I would like to ask you please wave the Reinstatement Fee, as I am sending you the amount of US\$ 122.50 (US\$ 61.25 for each year, 2006 and 2007), plus the completed UBR Form of the 2007 with correct address and Board of Directors.

I would like to ask you to please consider this, and file these as soon as possible.

If there is any other necessary information concerning this matter, please feel free to contact me. Thank you.

Sincerely,



Paulo Lucas Sacramento
President

ASSEMBLY OF GOD MISSION PHILADELPHIA CORP.