

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000004252

FILED
Jul 15, 2003
Secretary of State

Entity Name: TRUE WORSHIP APOSTOLIC FAITH INC.

Current Principal Place of Business:

3615 NW 191ST STREET
MIAMI, FL 33055

New Principal Place of Business:

5900 N.W. 17TH AVE
MIAMI, FL 33142

Current Mailing Address:

1662 NW 152 TERR.
MIAMI, FL 33054

New Mailing Address:

FEI Number: 65-0603063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLLIER, KENNETH C SR
1662 BW 152 TERR.
MIAMI, FL 33054 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLLIER, KENNETH C SR
Address: 1662 N.W. 152 TERRACE
City-St-Zip: MIAMI, FL 33054

Title: T () Delete
Name: BENJAMIN, LISA P
Address: 1662 N.W. 152 TERRACE
City-St-Zip: MIAMI, FL 33054

Title: S () Delete
Name: JOHNSON, NIKKI
Address: 860 N.W. 197 TERRACE
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: COLLIER, ANTHONY
Address: 5241 N W 190 ST
City-St-Zip: MIAMI, FL 330558

Title: D () Delete
Name: COLLIER, SHONDA
Address: 1662 NW 152 TERR
City-St-Zip: MIAMI, FL 33054

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BROOKLYN, ANNETTE
Address: 945 AHMAD STREET.
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change () Addition
Name: BROOKLYN, IRA
Address: 17630 N.W. 46 AVE
City-St-Zip: MIAMI, FL 33055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: PRYCE, MARY
Address: 860 N.W. 197TH TERRACE
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH COLLIER

P

07/15/2003

Electronic Signature of Signing Officer or Director

Date

COLLIER, ANTHONY D