

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 10, 1999 8:00 am**  
**Secretary of State**

03-10-1999 90063 018 \*\*\*\*70.00

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**DOCUMENT # N96000001128**

1. Corporation Name

**UNITED ASSEMBLY OF CHRIST AND TABERNACLE, INC.**

Principal Place of Business

514-B INDEPENDENCE RD.  
WEST PALM BEACH FL 33405

Mailing Address

3883 HIAWATHA AVE. #3  
WEST PALM BEACH FL 33409



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

02/28/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

DANIEL, SUNDRE REV.  
3883 HIAWATHA AVE. #3  
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name **DANIEL SUDRE**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**3883 HIAWATHA AVE #3**  
83 **WEST PALM BEACH**  
84 City **FL** 85 Zip Code **33409**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

**3/3/99**

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE  
NAME **SUDRE, DANIEL REV.**  
STREET ADDRESS **3883 HIAWATHA AVE.**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **DV** ☐ DELETE  
NAME **EUGENE, JACQUES P REV**  
STREET ADDRESS **3883 HIAWATHA AVE**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **DST** ☐ DELETE  
NAME **ABOITE, PAUL REV**  
STREET ADDRESS **645 NW 47TH ST.**  
CITY-ST-ZIP **MIAMI FL 33127**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** ☒ Change ☐ Addition  
1.2 NAME **EUGENE, JACQUES P. REV**  
1.3 STREET ADDRESS **3883 HIAWATHA AVE**  
1.4 CITY-ST-ZIP **West Palm Beach FL 33409**

2.1 TITLE **DV** ☒ Change ☐ Addition  
2.2 NAME **SUDRE, DANIEL REV**  
2.3 STREET ADDRESS **3883 HIAWATHA AVE**  
2.4 CITY-ST-ZIP **West Palm Beach FL 33409**

3.1 TITLE **DST** ☒ Change ☒ Addition  
3.2 NAME **DORCE, JOSIAS REV**  
3.3 STREET ADDRESS **52 NW 61<sup>ST</sup> Miami FL 33127**  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Jacq. Eugene** **SIGNATURE REQUIRED** **JACQUES P. EUGENE**

**3/3/99** **(561) 478-3029**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/98)