

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004705

1. Entity Name

CHRISTIAN MISSION ADONAI INC.

**FILED**  
**Feb 11, 2000 8:00 am**  
**Secretary of State**

02-11-2000 90021 028 \*\*\*\*61.25

Principal Place of Business

Mailing Address

250 CORY AVE NE  
PALM BAY FL 32907

250 CORY AVE NE  
PALM BAY FL 32907-2471

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3396391

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROMERO, FRANCISCO  
250 CORY AVE NE  
PALM BAY FL 32907

Name

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 PD  
NAME PASTOR FRANCISCO ROMERO  
STREET ADDRESS 250 CORY AVE  
CITY-ST-ZIP PALM BAY FL ☐ Delete

TITLE VPT  
NAME ROMERO, WILLIAM  
STREET ADDRESS 1063 HOOPER AVE  
CITY-ST-ZIP PALM BAY FL ☒ Delete

TITLE T  
NAME PAGAN, RAFAEL  
STREET ADDRESS 1070 HOOPER AVE NE  
CITY-ST-ZIP PALM BAY FL ☐ Delete

TITLE S  
NAME ROMERO, AIDA  
STREET ADDRESS 1063 HOOPER AVE  
CITY-ST-ZIP PALM BAY FL ☒ Delete

TITLE V  
NAME ROMERO, JUAN  
STREET ADDRESS 1063 HOOPER AVE  
CITY-ST-ZIP PALM BAY FL ☐ Delete

TITLE T  
NAME GARCIA, ADA E  
STREET ADDRESS 1792 SANDS RD  
CITY-ST-ZIP PALM BAY FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME FRANK MARCOS ROMERO  
STREET ADDRESS 295 WAVECREST AVE N.E  
CITY-ST-ZIP Palm Bay FL 32907 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ADA Rodriguez  
NAME 1792 Sand St  
STREET ADDRESS Palm Bay FL 32909 ☐ Change ☐ Addition  
SECRETARY

TITLE Antonio Rivera  
NAME 1055 Hooper Ave  
STREET ADDRESS ☐ Change ☒ Addition

TITLE Sandra Valentin  
NAME 295 WAVECREST AVE  
STREET ADDRESS Palm Bay FL 32907 ☐ Change ☒ Addition  
(Treasurer)  
Treasurer

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(321) 724 4937