

**NOT FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT# N97000004476

1. Entity Name

IGREJA EVANGELICA ASSEMBLEIA DE DEUS - MIAMI BEACH, INC.

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90156 008 *****61.25

10065093

Principal Place of Business	Mailing Address
1075 93RD STREET #02	1075 93RD STREET #02
BAY HARBOR ISLAND FL 33154	BAY HARBOR ISLAND FL 33154

2. Principal Place of Business		3. Mailing Address	
7801 CARLYLE AVENUE		7801 CARLYLE AVENUE	
Suite Apt. #, etc.		Suite Apt. #, etc.	
City & State		City & State	
MIAMI BEACH FL		MIAMI BEACH FL	
Zip	Country	Zip	Country
33141		33141	

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For	
65-0766538		<input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
<input type="checkbox"/>			
6. Name and Address of Current Registered Agent			
7. Name and Address of New Registered Agent			
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 _____

FEE IS \$61.25 Initial or Amended UBR	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	TITLE	P
NAME	FIGUEIREDO, MACIEL	NAME	FIGUEIREDO, MONICA
STREET ADDRESS	7801 CARLYLE AVE	STREET ADDRESS	7801 CARLYLE AVENUE
CITY-ST-ZIP	MIAMI FL 33141	CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE	VTD	TITLE	VTD
NAME	FIGUEIREDO, MONICA	NAME	RODRIGUES, FELIPE
STREET ADDRESS	7801 CARLYLE AVENUE	STREET ADDRESS	7801 CARLYLE AVENUE
CITY-ST-ZIP	MIAMI BEACH FL 33141	CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE	SD	TITLE	SD
NAME	AQUINO, ELIZETE	NAME	CARNEIRO, MARIA DAS GRACAS
STREET ADDRESS	585 78TH STREET	STREET ADDRESS	7801 CARLYLE AVENUE
CITY-ST-ZIP	MIAMI BEACH FL 33141	CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 607, Florida Statutes, and that my name appears in Block 11 or Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 04/07/03 (305) 868-5497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #