

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004565

1. Entity Name

SWEETWATER CONGREGATION OF JEHOVAH'S WITNESS, IN

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90008 023 ****61.25

Principal Place of Business

Mailing Address

11699 W. FLAGER ST.
MIAMI FL 33174

11699 W. FLAGER ST.
MIAMI FL 33174-1027

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0782150

Applied For

Not Applicable

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

ALONSO, GUIDO J
4733 S.W. 135TH PLACE
MIAMI FL 33175

Name **EDUARDO I. MOLINA**

Street Address (P.O. Box Number is Not Acceptable)
110 S.W. 136 AVENUE

City **MIAMI** FL Zip Code **33184**

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 Eduardo Molina. EDUARDO I. MOLINA. (NOTE: Registered Agent signature required when reinstating)

DATE 1/5/00

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 **DP** ☒ Delete
NAME **ALONSO, GUIDO J**
STREET ADDRESS **4733 S.W. 135TH PLACE**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE **DP** ☒ Change ☐ Addition
NAME **MOLINA, EDUARDO**
STREET ADDRESS **110 S.W. 136 AVE.**
CITY-ST-ZIP **MIAMI, FL 33184**

TITLE **DS** ☒ Delete
NAME **RODRIGUEZ, DIOSDADO**
STREET ADDRESS **3601 S.W. 126TH AVE.**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE **DS** ☐ Change ☒ Addition
NAME **JIMENEZ, LUIS**
STREET ADDRESS **11243 S.W. 33 CIRCLE PL.**
CITY-ST-ZIP **MIAMI, FL 33165**

TITLE **DT** ☐ Delete
NAME **MOLINA, EDUARDO**
STREET ADDRESS **110 S.W. 136TH AVE.**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE **DT** ☐ Change ☒ Addition
NAME **GARCIA, JORGE**
STREET ADDRESS **784 N.W. 135 CT**
CITY-ST-ZIP **MIAMI, FL 33182**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: EDUARDO I. MOLINA 1/5/00 305-593-0089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)