## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment-

SIGNATURE: -

with an address, with all other like of

## **FILED** DOCUMENT # **N97000004767** Jan 28, 2000 8:00 am **Secretary of State** RADIO MARANATHA, INC. 01-28-2000 90092 010 \*\*\*\*61.25 Principal Place of Business Mailing Address 7215 FOREST CITY ROAD 7215 FOREST CITY ROAD ORLANDO FL 32810-3703 ORLANDO FL 32810 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3472623. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) FLECHA, ELIAS R 6117 SHADOW WOOD COURT ORLANDO FL 32808 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 14. This Programme COFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. b. . + 1 the we we as he as Addition ☐ Delete TITLE ☐ Change NAME NAME FLECHA, ELIAS STREET ADDRESS 6117 SHADOW WOOD COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME ROSARIO, SAMUEL STREET ADDRESS STREET ADDRESS 239 CHURCHILL DRIVE CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL 32779 ☐ Delete ☐ Change Addition TITLE Santos, Kosa María 201 forest lake, Dr. NAME NAME ROMERO, DIALIS STREET ADDRESS STREET ADDRESS 5680 Grand Canyon Drive Socials CITY-ST-ZIF CITY-ST-ZIP ORLANDO FL 32810 TITLE Change ☐ Addition ☐ Delete T)T) F NAME NAME MIRANDA, MIGUEL STREET ADDRESS STREET ADDRESS 1916 SPURCE RIDGE DRIVE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32808 ☐ Change ☐ Addition Delete TITLE NAME NAME DIAZ. VIRGILIO STREET ADDRESS STREET ADDRESS 5342 REGAL OAK CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32810 ☐ Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS 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