## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N97000006769

FILED Jul 29, 2002 Secretary of State

Entity Name: "THE GOOD SHEPHERD" PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6012 N.W. MARGATE	. 9TH CT. E, FL 33063		6012 N.W. 9TH CT. MARGATE, FL 3306	3 US	
Current M	lailing Addre	ess:	New Mailing Addres	ss:	
4699 N ST #C4	ATE RD 7		6261 SW 5 ST MARGATE, FL 3306	68 US	
	C, FL 33319	US	W/ ((G/ (TE, TE 0000		
FEI Number	: 65-1126473	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
702 SW 81	1 / <b>\ V</b>				
The above	named entity	FL 33068 US submits this statement for the	purpose of changing its register	ed office or registered agent, or both	
NORTH LATH LATHER AND ADDRESS TO A THE STATE	named entity e of Florida.	,	purpose of changing its register	ed office or registered agent, or both	
NORTH LA	e named entity e of Florida. RE:	,		ed office or registered agent, or both  Date	
NORTH LATH LATH AND ADDRESS TO ADDRESS TO ADDRESS TO ADDRESS ADDRESS TO ADDRESS ADDRES	e named entity e of Florida. RE:	y submits this statement for the	ent		
NORTH LATH LATH AND ADDRESS TO ADDRESS TO ADDRESS TO ADDRESS ADDRESS TO ADDRESS ADDRES	e named entity e of Florida. RE: Electrons S AND DIRECTE DP ( BARBARAN, F 702 SW 81 A	onic Signature of Registered Age  CTORS:  ) Delete  PABLO	ent	Date	
NORTH LA The above In the State SIGNATUE  OFFICER: Value:	e named entity e of Florida.  RE: Electro  S AND DIRECT  DP ( BARBARAN, F 702 SW 81 A' N LAUDERDA  DT ( POZO, VICTO 6572 SW 8C1	v submits this statement for the poinc Signature of Registered Age CTORS:  1) Delete PABLO VE APT 2A LLE, FL 33068  1) Delete PAR C	ent  ADDITIONS/CHANG  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTO	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PABLO BARBARAN DP 07/29/2002