

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000007191

1. Entity Name

METROPOLITAN COMMUNITY CHURCH SOUTH BEACH, INC.

FILED
Jun 15, 2000 8:00 am
Secretary of State

06-15-2000 90003 032 ****70.00

Principal Place of Business

Mailing Address

1500 BAY RD. STE 583
MIAMI BEACH FL 33139-3233

P.O. BOX 399117
MIAMI BEACH FL 33239-9117

2. Principal Place of Business

2100 Washington Avenue
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 399117
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Miami Beach, Florida

Zip
33139
Country
U.S.

City & State
Miami Beach, Florida

Zip
33239-9117
Country
US

4. FEI Number
65-0799500

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

YOUNG, DONALD
10730 SW 136TH COURT
MIAMI FL 33186

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: *Donald Young*
Signature, typed or printed name of registered agent and file 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SLACK, BARRY K
3550 AVOCADO AVE.
COCONUT GROVE FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
VAZQUEZ, JOSE A.
443 NE 195 ST., #436
N. MIAMI BEACH FL 33179 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
SANTIAGO, VICTOR
21121 SW 85 AVE #211
MIAMI FL 33189 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
YOUNG, DONALD
10730 SW 136TH COURT
MIAMI FL 33186 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PERKINS, SAMUEL
835 LENOX AVE, #5
MIAMI BCN FL 33139 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MELGO, CARLOS
443 NE 195 STREET, #436
N. MIAMI BEACH FL 33179 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
Vazquez Jose A.
2500 Parkview Drive Apartment 809-Olympus
Hallandale Beach, FL 33009 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Perkins, Samuel S.
835 Lenox Avenue, Apartment 303
Miami Beach, FL 33139 ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Regina Anthony
20 Island Avenue, Apartment 1117
Miami Beach, FL 33139 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Mielgo, Carlos
2500 Parkview Drive, Apartment 809-Olympus
Hallandale Beach FL 33009 ☒ Change ☐ Addition

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: *Donald Young*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/29/2000
Date

(305) 534-3387
Daytime Phone #

CR2E037 (9/99)