

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001021

1. Entity Name

JAVIER MORIN-RODRIGUEZ MINISTRY, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90107 011 ****70.00

Principal Place of Business

Mailing Address

15653 SW 96TH TERR.
MIAMI FL 33196

P.O. BOX 960514
MIAMI FL 33296-0514



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0825038

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HANCOCK-MORIN, CHRISTINA
15653 SW 96TH TERR.
MIAMI FL 33196

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

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 PD
NAME MORIN-RODRIGUEZ, JAVIER
STREET ADDRESS 15653 SW 96TH TERR.
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

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

TITLE VPT
NAME HANCOCK-MORIN, CHRISTINA
STREET ADDRESS 15653 SW 96TH TERR.
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

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

TITLE BD
NAME VINCENT, VALEDON
STREET ADDRESS 5525 CARDINIA ST
CITY-ST-ZIP CORAL GABLES FL 33146 ☐ Delete

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

TITLE BD
NAME DUGAND, JOSE V
STREET ADDRESS 7205 SW 125 AVE
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE BD
NAME SERPA, JOSE
STREET ADDRESS 7205 SW 125 AVE
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE BD
NAME DUGAND, JESSICA
STREET ADDRESS 7205 SW 125 AVE
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Christina Morin **REQUIRED** CHRISTINA MORIN 4/25/2000 305 387 3873

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)