2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State
04-16-2002 90030 004 ****61.25

DOCUMENT # N98000001406

1. Entity Name

TOUCHING MIAMI WITH LOVE MINISTRIES, INC.

Principal Place of Business	Mailing Address
46 NE 6TH STREET MIAMI FL 33132	46 NE 6TH STREET MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

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 65-0831654 ☐ 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
WYNN, LARRY 46 NE 6TH STREET MIAMI FL 33132	Name: Porter, D. Steven Street Address (P.O. Box Number is Not Acceptable): 46 NE 6th Street City: Miami **FL** Zip Code: 33132

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: D. Steven Porter D. Steven Porter, Executive Director DATE: 3/27/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 EVANS, EVELYN 515 CALIGULA CORAL GABLES FL 33146	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MULDER, ANNE 6080 SW 28TH ST. MIAMI, FL 33155	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MARENAU, CARL 9130 SUNSET DR MIAMI FL 33173	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FRANKLIN, TOM 401 NW 2ND AVE., Suite N-1007 MIAMI, FL 33128	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD USHER, MARILYN L 245 NW 8TH STREET MIAMI FL 33126	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WILLIX, LUANN 370 GRAND CONCOURSE MIAMI SHORES, FL 33138	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PONCETI, TONY 8367 NW 12TH STREET MIAMI FL 33126	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BIGGS, VICTOR PO BOX 350370 MIAMI, FL 33135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANSLEY, JENISU 1125 SW 100 COURT MIAMI FL 33174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARDY, MARILYN 464 NE 16TH ST. MIAMI, FL 33132	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MULDER, ANNE 6080 SW 28TH STREET MIAMI FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHUFFIELD, RON 1360 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146	☒ Change ☐ Addition

CR2E037 (9/01)

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: Anne Mulder Anne Mulder, President, Board of Dirs. 3/24/02 305-577-1840
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #