2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002082

WORD EXPLOSION APOSTOLIC & PROPHETIC NETWORK, IN C.

Principal Place of Business

Mailing Address

2330 N.W. 47TH AVENUE LAUDERHILL EL 33313

2330 N.W. 47TH AVENUE

CAUDENHILL	FE 33313		LAUDENNILI	L FL 33313								
2. Principal	Place of Busin	ness	3. Mailing	Address	<u>.</u>							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta	ate		City & S	State		· ··.	4. FEI Number Applied For					7
Zip	Zip Country				- Count	try	65-0845677		N 8.75 Ad	ot Applicable	7	
	6. Name	and Address of Current Re	gistered Ac	red Agent				5. Certificate of Status Desired				
						Name						
BALL, TERRY LAMAR 2330 N.W. 47TH AVENUE						Street Address (P.O. Box Number is Not Acceptable)						
	IILL FL 3331					City			FL	Zip Coo		
the obliga	e named entity ttions of regist	v submits this statement for the ered agent.	e purpose o	of changing its	registered	office or regis	tered agent, or both	in the State of	Florida. I am fa	miliar with	and accept	1
SIGNATURE		or printed name of registered agent and	title if applicable	. (NOTE	E: Registered A	gent signature requi	ired when reinstating)	··	DATE			
After September 13, 2002, 9. Election C min. will be \$236.25. Trust Fund					npaign Fina Contribution		\$5.00 May Be Added to Fees	,	lake Check Departmen	Payable t of State	to	
10. OFFICERS AND DIRECTOR					11.		ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ball, Ter 2330 N.W. Lauderhii	1	☐ Delete TITLE NAM STRE CITY-		ADDRESS - ZIP				☐ Change	☐ Addition	1007	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SIPALA, JOSEPH 4130 N.W. 39TH STREET, APT. 207 OAKLAND PARK FL 33312			Delete	TITLE NAME STREET A CITY-ST	- 1				Change	Addition	150
TITLE NAME STREET ADDRESS CITY-ST-ZIP		HELLE 47TH AVENUE L FL 33313		□ Delete	TITLE NAME STREET A CITY-ST					Change	☐ Addition	
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TITLE VAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A				[Change	☐ Addition	

12. I hereby certify that the information supplied with this filling 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:

FILED

Sep 11, 2002 8:00 am Secretary of State 09-11-2002 90100 046 ****61.25