2001 UNIFORM BUSINESS REPORT-(UBR)

FILED Feb 28, 2001 8:00 am DOCUMENT # N98000002982 Secretary of State LOVE AND HOLINESS MINISTRIES, INC. 02-28-2001 90115 047 ****61.25 Principal Place of Business Mailing Address 12801 S.W. 248TH TERRACE 12801 S.W. 248TH TERRACE MIAMI FL 33032 MIAMI FL 33032 925404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0840319 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HURTADO, MIGUEL A 12801 S.W. 248TH TERRACE MIAMI FL 33032 City Zip Code FL 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: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F ☐ Delete TITLE XX Change Addition HURTADO, MIGUEL A NAME Advisor/Director Fara C. Valdez NAME STREET ADDRESS 12801 S.W. 248TH TERRACE STREET ADDRESS CITY-ST-7IP PRINCETON FL 33032 CITY-ST-ZIP 15018 SW 90 Ter, Miami 33196 TITLE Delete TITLE Secretary/Director ☐ Change XX Addition HURTADO, YNES A NAME NAME Pavel Fernandez STREET ADDRESS 12801 S.W. 248TH TERRACE STREET ADDRESS 9510 Lisa Road CITY-\$T-ZIP CITY-ST-ZIP PRINCETON FL 33032 Miami. FL 33157 Assist Secretary/Director Change XIX Addition ☐ Delete TITLE NAME VALDES, FARA C NAME Maria Fernandez STREET ADDRESS 15018 SW 90 TERR STREET ADDRESS 95_{10} Lisa Road CITY-ST-ZIP MIAMI FL 33196 CITY-ST-ZIP Miami, FL 33157 TITLE TITLE Delete ☐ Change XX Addition Treasurer/Director NAME BARBOSA, THAISA NAME Zaida Alomar-Lantigua STREET ADDRESS 12801 SW 248 TERR STREET ADDRESS 21945 SW 104 Ct.#103 CITY-ST-ZIP **MIAMI FL 33032** CITY-ST-ZIP TITLE ☐ Delete TITLE Assist.Treasurer/Director Change XX Addition NAME NAME Jaime Lantiqua STREET ADDRESS STREET ADDRESS 21945 SW 104 Ct.#103 CITY-ST-ZIP CITY-ST-ZIP Miami. FL 33190 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

12. I hereby certify that the information supplied with this filing indicated on this report or supplemental report is true and of the corporation or the ecciver or trustee empowered to changed, or on an attachment with an address, with an other contents. does no stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information e s**y**all have the same legal effect as if made under oath; that I am an officer or director by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if accurate

STREET ADDRESS CITY-ST

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPE