

2000 UNIFORM BUSINESS REPORT (UBR)

FILED  
Mar 24, 2000 8:00 am  
Secretary of State  
03-24-2000 90066 034 \*\*\*61.25

DOCUMENT # N98000004076

Entity Name  
BRANCH OF THE LORD, INC.

Principal Place of Business  
571 WEST OAKLAND BLVD., BUILDING G, #103  
FORT LAUDERDALE FL 33313

Mailing Address  
5071 WEST OAKLAND BLVD., BUILDING G, #103  
FORT LAUDERDALE FL 33313

Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number  
65-0967197  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NATOUR, CHASTA  
5071 WEST OAKLAND BLVD., BUILDING G, #103  
FORT LAUDERDALE FL 33313

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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

OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
LE ME REET ADDRESS Y-ST-ZIP	PSD NATOUR, LINDA 5071 WEST OAKLAND BLVD., BUILDING G, #103 FORT LAUDERDALE FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
LE ME REET ADDRESS Y-ST-ZIP	VPTD NATOUR, CHASTA 5071 WEST OAKLAND BLVD., BUILDING G, #103 FORT LAUDERDALE FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
LE ME REET ADDRESS Y-ST-ZIP	D NATOUR, TAREK 5071 WEST OAKLAND BLVD., BUILDING G, #103 FORT LAUDERDALE FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
LE ME REET ADDRESS Y-ST-ZIP	D NATOUR, SAMI 5071 WEST OAKLAND BLVD., BUILDING G, #103 FORT LAUDERDALE FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
LE ME REET ADDRESS Y-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
LE ME REET ADDRESS Y-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: CHASTA NATOUR  
2/17/2000 (954) 714-1101  
Date Daytime Phone #