

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90027 032 ****70.00

DOCUMENT # N98000006388

1. Entity Name

MONTE HOREB CHURCH ASSEMBLY OF GOD, INC.

Principal Place of Business

Mailing Address

1228 NORMANDY DR
 MIAMI BEACH FL 33141
 US

7098 BONITA DE
 MIAMI BEACH FL 33141-3107
 US

2. Principal Place of Business

1228 NORMANDY DR

3. Mailing Address

P.O. BOX 6413

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIAMI BEACH, FLORIDA

City & State

MIAMI BEACH, FLORIDA

4. FEI Number

65-0875605

Applied For

Not Applicable

Zip
33141

Country
US

Zip
33141

Country
US

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

DA ROCHA, JOSE F
7441 WAYNE AVE
#10Q
MIAMI BEACH FL 33141

Name **JOSE FRANCA DA ROCHA**

Street Address (P.O. Box Number is Not Acceptable)
7441 WAYNE AVE #10-Q

City **MIAMI BEACH** FL Zip Code **33141**

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

(NOTE: Registered Agent signature required when reinstating)

4-28-00

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 Delete
 NAME **DP DA ROCHA, JOSE F**
 STREET ADDRESS **7441 WAYNE AVE #10Q**
 CITY-ST-ZIP **MIAMI BEACH FL 33141**

TITLE Change Addition
 NAME **DP DA ROCHA, JOSE F**
 STREET ADDRESS **7441 WAYNE AVE #10-Q**
 CITY-ST-ZIP **MIAMI BEACH - FL-33141**

TITLE Delete
 NAME **DV DA ROCHA, MARIA A**
 STREET ADDRESS **7441 WAYNE AVE #10Q**
 CITY-ST-ZIP **MIAMI BEACH FL 33141**

TITLE Change Addition
 NAME **DV FERRAZ, JOAO**
 STREET ADDRESS **1181 SE 6TH AVE #200**
 CITY-ST-ZIP **DEERFIELD BEACH - FL 33441**

TITLE Delete
 NAME **DST MARTINS, DINO**
 STREET ADDRESS **1800-71ST JOHN F KENNEDY CSWY #305**
 CITY-ST-ZIP **MIAMI BEACH FL 33141**

TITLE Change Addition
 NAME **D MARTINS, DINO**
 STREET ADDRESS **2016 BAY DR #902**
 CITY-ST-ZIP **MIAMI BEACH - FL 33141**

TITLE Delete
 NAME **ST LIMA, RITA A**
 STREET ADDRESS **1780 MARSEILLES DR #01**
 CITY-ST-ZIP **MIAMI BCH FL 33141**

TITLE Change Addition
 NAME **ST FERRAZ, ERICA**
 STREET ADDRESS **1181 SE 6TH AVE # E.200**
 CITY-ST-ZIP **DEERFIELD BEACH - FL 33441**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(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: **SIGNATURE REQUIRED**

PRESIDENT 4-28-00. 4092256

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)