2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2002 8:00 am DOCUMENT # **N98000006503** Secretary of State 1. Entity Name 02-01-2002 90061 020 ****61.25 DIVINITY BAPTIST CHURCH, INC. Mailing Address Principal Place of Business 1071 N.E. 179TH ST. 11500 N.W. 17TH AVE. MIAMI FL 33168 NO. MIAMI BEACH FL 33162 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0914442 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SANON, HERVENS V 107 N.E. 179TH ST. NO. MIAMI BEACH FL 33162 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 (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9.-Election-Gampaign-Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition Delete TITLE TITLE D, Chairperson, CHRISTINA SANON PREVILON, YVON REV NAME NAME STREET ADDRESS 1071 N.E 179th Street STREET ADDRESS 820 NW 101ST ST CITY-ST-ZIP No. Miami Beach, FL 33162 CITY-ST-ZIP MIAMI FL ☐ Change Addition ☐ Delete TITLE PDS TITLE SANON, HERVENS V NAME NAME DIEULA MICELIS STREET ADDRESS STREET ADDRESS 1071 NE 179TH ST 8321 N.E. 1st Ave., #4 CITY-ST-ZIP CITY-ST-ZIP N MIAMI BCH FL 33162-1215 <u> Miami = FL_33138</u> Change Addition TITLE Delete TITLE D, P, S, T NAME ISIDORE, CAVENA NAME HERVENS V. SANON STREET ADDRESS STREET ADDRESS 19300 NW 7TH AVE 1071 N.E. 179th Street CITY-ST-ZIP CITY-ST-ZIP MIAMI FL No. Miami Beach, FL 33162 ☐ Addition X Delete TITLE TITLE NAME LUC, CELANIE NAME STREET ADDRESS 820:NW-101ST ST -STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Addition ☐ Delete TITLE AS TITLE NAME SANON, CHRISTINA NAME STREET ADDRESS STREET ADDRESS 1071 NE 179TH ST CITY-ST-ZIP CITY-ST-ZIP N MIAMI BEACH FL 33162-1215 ☐ Change Addition TITLE TITLE 2AS Delete

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 hame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

NAME

STREET ADORESS

CITY-ST-ZIP

ESCARMENT, ANA

MIAMI FL

19410 NW 7TH AVE

SIGNATURE REQU