

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90194 030 ****61.25

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1. Entity Name

THY KINGDOM COME MINISTRIES, INC.



Principal Place of Business

**19825 NW 44TH PL
MIAMI FL 33055**

Mailing Address

**19825 NW 44TH PL
MIAMI FL 33055**

11015271

2. Principal Place of Business

2515 N.W. 95th St.

3. Mailing Address

P.O. BOX 531244

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number **65-0878802**

Applied For
Not Applicable

Zip
33147

Country
US

Zip
33153-1244

Country
US

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

6. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **WRIGHT, ALPHONSE**
STREET ADDRESS **2420 NORTHWEST 60 STREET**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE **SVD** ☒ Delete
NAME **STOKES, JACKIE**
STREET ADDRESS **19825 NW 44TH PL**
CITY-ST-ZIP **MIAMI FL 33055**

TITLE **TD** ☐ Delete
NAME **CASTENADOS, FERMIN**
STREET ADDRESS **7900 NE 2ND AVE., SUITE 504**
CITY-ST-ZIP **MIAMI FL 33138**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SVD** ☐ Change ☒ Addition
NAME **Hanna Cynthia**
STREET ADDRESS **4848 N.W. 8th Ct.**
CITY-ST-ZIP **Plantation, FL. 3317**

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Willie Walker**
STREET ADDRESS **5121 Redfox Run**
CITY-ST-ZIP **Tallahassee, FL. 32303**

TITLE ☐ Change ☒ Addition
NAME **Watley Loretta**
STREET ADDRESS **621 N.W. 15th Ave.**
CITY-ST-ZIP **Pompano Beach, FL. 33060**

TITLE ☐ Change ☐ Addition
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 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: **Alphonse Wright President 4/21/03**

CR2E037 (10/02)