

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90115 048 ****70.00

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1. Entity Name

ASSOCIATION OF BRAZILIAN BAPTIST CHURCHES OF NOR

(Handwritten initials)

Principal Place of Business

**4699 N FEDERAL HIGHWAY, S-208J
POMPANO BEACH FL 33064**

Mailing Address

**4699 N FEDERAL HIGHWAY, S-208J
POMPANO BEACH FL 33064**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0866390

Applied For

Not Applicable

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

**ALMEIDA, SILAIR COLETA
4699 N FEDERAL HIGHWAY, S-208J
POMPANO BEACH FL 33064**

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.

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
After September 12, 2001, min. will be \$236.25**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MENDES, CARLOS
5671 NW WESTERN AV.
WASHINGTON DC 20015** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SIMOES, ADEMIR
901 TRINITY
AUSTIN, TX 78701** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
WESLEY, BILLY
298 SAN BRUNO AV
BRISBANE CA 94005** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
JOSE RIBAMAR MONTEIRO
355 ROBIN DR.
CORTE MADEIRA, CA 94925** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
DE BARROS, DPHIR
PO BOX 4515
DANBURY CT 06813** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FRANCISCO IZTUORO
83-87 264 ST
FLORAL PARK - NY - 11004** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ESTD
ALMEIDA, SILAIR COLETA
2372N.W. 34TH ROAD
COCONUT CREEK FL 33066** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
NELSON DOMINGUES
1500 E. CENTRAL RD
MT. PROSPECT - IL - 60056** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
MONREW, ANDREIA
335 ROBIN DR
CORTE MADERA CA 94925** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SILVANEIDE RIBEIRO PAIVA
355 ROBIN DR.
CORTE MADEIRA - CA - 94925** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
FERREIRA, NEIZY
4520 SEMINARY P #C
NEW ORLEANS LA 70126** ☒ 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 name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Handwritten signature)
SILVANEIDE RIBEIRO PAIVA

7/6/01 - 954-977-5821

CR2E037 (5/01)