

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

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90124 031 ****70.00

DOCUMENT # N99000002632

1. Entity Name

JESUS EMMANUEL HOLINESS CHURCH, INC.



Principal Place of Business

**10701 SW 216TH ST BAY 17
GOULDS FL 33170**

Mailing Address

**10431 SW 184 ST.
MIAMI FL 33157**

90020619



2. Principal Place of Business

**10431 SW 190TH BAY 36
MIAMI**

3. Mailing Address

**22062 SW 126 Ave
MIAMI, FL 33170**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FL 33157

DADE

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0916707**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

BERNARD, ANTHONY

9033 SW 152 ST

MIAMI FL 33157

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 **D** ☐ Delete
NAME **DOUGLAS, OZELL**
STREET ADDRESS **10431 SW 184TH ST**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☐ Delete
NAME **DOUGLAS, SARAH**
STREET ADDRESS **10431 SW 184TH ST**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☒ Delete
NAME **CARTER, FRED**
STREET ADDRESS **920 NW 84TH TERR**
CITY-ST-ZIP **MIAMI FL 33150**

TITLE **D** ☐ Delete
NAME **ANDREWS, MAE**
STREET ADDRESS **10725 SW 146 TERR**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **D** ☐ Delete
NAME **BROWN, ALBERTA**
STREET ADDRESS **19460 BELLVIEW DRIVE**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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)(l), 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:

BERNARD, ANTHONY

2/6/03

3050575705

CR2E037 (10/02)