

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90145 043 ****61.25

DOCUMENT # N99000002648

1. Entity Name

FOUNTAIN OF LIFE INTERNATIONAL CHURCH, INC.



Principal Place of Business

Mailing Address

**3950 COCONUT CREEK PARKWAY
 COCONUT CREEK FL 33066**

**3950 COCONUT CREEK PARKWAY
 COCONUT CREEK FL 33066**

2. Principal Place of Business

3. Mailing Address

5514/16 Sample RD.

5514/16 Sample RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MARGATE - FL

City & State

MARGATE, FL

4. FEI Number

65-0909234

Applied For

Not Applicable

Zip

33063

Country

USA

Zip

33063

Country

USA

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

**PEREIRA, EDSON E
 3950 COCONUT CREEK PARKWAY
 COCONUT CREEK FL 33066**

Name

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

5514/16 Sample RD.

City

MARGATE

FL

Zip Code

33063

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

8/12/02

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 **PD** ☐ Delete
 NAME **PEREIRA, EDSON E**
 STREET ADDRESS **3950 COCONUT CREEK PARKWAY**
 CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE ☒ Change ☐ Addition
 NAME **5514/16 Sample RD**
 STREET ADDRESS **MARGATE, FL 33063**
 CITY-ST-ZIP **MARGATE, FL 33063**

TITLE **VD** ☐ Delete
 NAME **PEREIRA, SILVANA D**
 STREET ADDRESS **3335 BONITO LANE**
 CITY-ST-ZIP **MARGATE FL 33063**

TITLE ☒ Change ☐ Addition
 NAME **5514/16 Sample RD**
 STREET ADDRESS **MARGATE, FL 33063**
 CITY-ST-ZIP **MARGATE, FL 33063**

TITLE **SD** ☐ Delete
 NAME **PERIERA, SIRLEN**
 STREET ADDRESS **3527 WILES ROAD #206**
 CITY-ST-ZIP **COCONUT CREEK FL 33073**

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

TITLE **TD** ☒ Delete
 NAME **DIAS, GERALDO A**
 STREET ADDRESS **7108 CRESCENT CREEK LANE**
 CITY-ST-ZIP **COCONUT CREEK FL 33073**

TITLE ☒ Change ☐ Addition
 NAME **SANTOS, SERGIO WAGNER**
 STREET ADDRESS **15143 W. ATLANTIC BLVD**
 CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/12/02 (954) 4200051

Date

Daytime Phone #

CR2E037 (9/01)