

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000003301

FILED
Apr 28, 2003
Secretary of State

Entity Name: ASOCIACION DE MINISTROS DE BROWARD, INC.

Current Principal Place of Business:

P.O. BOX 450425
SUNRISE, FL 333450425

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 450425
SUNRISE, FL 333450425

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZQUEZ, RAFAEL JR
3417 ISLAND DR.
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RODRIGUEZ, ALEJANDRO
Address: 8100 SW 12TH
City-St-Zip: FT LAUDERDALE, FL 33068

Title: TD () Delete
Name: ALHENAR, RAQUEL
Address: 1981 WEST OAKLAND PARK RD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: CD () Delete
Name: RICARDO, CALLEO
Address: 3591 N.W. 95 TERRACE #201
City-St-Zip: SUNRISE, FL 33351

Title: VSSD () Delete
Name: VARGAS, GONZALO
Address: 7523 SW 6CT.
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: CALLEJAS, GABRIEL
Address: 6010 WOODLAND POINT DR.
City-St-Zip: TAMARAC, FL 33319

Title: VSD (X) Change () Addition
Name: VARGAS, GONZALO
Address: 7523 SW 6CT.
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: SD () Change (X) Addition
Name: GUZMAN, LIDIA M
Address: 1120 N 22 AVENUE
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GONZALO VARGAS

VD

04/28/2003

Electronic Signature of Signing Officer or Director

Date