2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State DOCUMENT # N9900003797 PALM BEACH MISSIONARY CHURCH OF GOD, INC. 04-23-2001 90100 030 ****70.00 Principal Place of Business Mailing Address 1550 N FEDERAL HWY. 3555 HARLOWE AVENUE LINIT 13 **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33435** 2. Principal Place of Business 3. Mailing Address 1550 N. FEDERAL HWY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE UNIT 14, 15,& 16 City & State City & State 4. FEI Number Applied For 65-0763013 BOYNTON BEACH, FLORIDA Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired X 33435 Fee Required USA 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent:-Name Street Address (P.O. Box Number is Not Acceptable) DERILUS, OSIAS REV 3555 HARLOWE AVENUE **BOYNTON BEACH FL 33436** 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. 14-11-01 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE D ☐ Delete TITLE ☐ Change NAME NAME DERILUS, OSIAS STREET ADDRESS STREET ADDRESS 3555 HARLOWE AVE. CITY-ST-ZIF CITY-ST-ZIP **BOYNTON BEACH FL 33436** TITLE Delete TITLE ☐ Change ☐ Addition n NAME NAME **ORESTE, ILOREST** STREET ADDRESS STREET ADDRESS 270 STERLING AVE. CITY-ST-ZIP CITY-ST-ZIF DELRAY BEACH FL 33444 TITLE TITLE - Change --- - Addition -SD □ Delete NAME NAME DERILUS, MYRTHO STREET ADDRESS 3555 HARLOWE AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BOYNTON BEACH FL 33436** TITLE DT ☐ Delete TITLE ☐ Change ☐ Addition NAME ILET, NICOLAS NAME STREET ADDRESS 635 S.W. 1ST CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33426** TITLE ☐ Delete TITLE Change ☐ Addition NÄMF ALBERT, GUIMSON NAME STREET ADDRESS STREET ADDRESS 171 OCEAN PARK WAY CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33435** TITLE Delete TITLE Change ☐ Addition NAME PROVIDENCE, PROVIDE NAME STREET ADDRESS STREET ADDRESS 250 MANCHESTER ST CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33487

2. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/01

(561)364-0931