

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003797

1. Entity Name

PALM BEACH MISSIONARY CHURCH OF GOD, INC.

Principal Place of Business

Mailing Address

1550 N. FEDERAL HWY.  
UNIT 14, 15, & 16  
BOYNTON BEACH FL 33435

3555 HARLOWE AVENUE  
BOYNTON BEACH FL 33436

2. Principal Place of Business

3. Mailing Address

1550 N. FEDERAL HWY  
Suite, Apt. #, etc.  
UNIT 7 & 8

SAME AS THE ABOVE  
Suite, Apt. #, etc.

City & State

BOYNTON BEACH, FL

City & State

BOYNTON BEACH, FL

Zip

33435

Country

PALM BEACH

Zip

33435

Country

USA

4. FEI Number

65-0763013

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

DERILUS, OSIAS REV  
3555 HARLOWE AVENUE  
BOYNTON BEACH FL 33436

Name

SAME AS THE ABOVE

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

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  
D  
DERILUS, OSIAS  
3555 HARLOWE AVE.  
BOYNTON BEACH FL 33436 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
INNOCENT, ROBERSON  
2114 NE 4TH COURT  
BOYNTON BEACH, FL 33435 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ORESTE, ILOREST  
270 STERLING AVE.  
DELRAY BEACH FL 33444 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
INNOCENT, ROBERSON  
2114 NE 4TH COURT  
BOYNTON BEACH, FL 33435 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
DERILUS, MYRTHO  
3555 HARLOWE AVE  
BOYNTON BEACH FL 33436 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
COMPANS, cham Solange  
524 Davis Rd  
Delray Beach, FL 33445 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
ILET, NICOLAS  
635 S.W. 1ST CT.  
BOYNTON BEACH FL 33426 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
COMPANS, cham Solange  
524 Davis Rd  
Delray Beach, FL 33445 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ALBERT, GUIMSON  
171 OCEAN PARK WAY  
BOYNTON BEACH FL 33435 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
COMPANS, cham Solange  
524 Davis Rd  
Delray Beach, FL 33445 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PROVIDENCE, PROVIDE  
250 MANCHESTER ST  
BOCA RATON FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
COMPANS, cham Solange  
524 Davis Rd  
Delray Beach, FL 33445 ☐ 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:

*Osias Derilus*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-02

FILED  
Apr 29, 2002 8:00 am  
Secretary of State

04-29-2002 90211 043 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

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CR2E037 (9/01)