2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an

SIGNATURE

FILED Jan 26, 2001 8:00 am Secretary of State DOCUMENT # N9900004301 1. Entity Name **BIBLE PRISON MINISTRY, INC.** 01-26-2001 90036 041 ****70 00 Principal Place of Business Mailing Address 430 N.E. 141ST STREET ** 430 N.E. 141ST STREET MIAMI FL 33161 MIAMI FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0955434_ Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) **DEMURO, DANIEL** 430 N.E. 141ST STREET **MIAMI FL 33161** Zip Code FL 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 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to **FEE IS \$61.25** Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE [] Addition ☐ Change DEMURO, DANIEL NAME NAME STREET ADDRESS 430 N.E. 141ST STREET STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33161** CITY-ST-ZIP TITLE □ Delete ☐ Change ☐ Addition DIMURO, CLEMENTE SR. NAME NAME STREET ADDRESS 9041 S.W. 103RD AVENUE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change ☐ Addition DIMURO, DAVID NAME NAME STREET ADDRESS 14451 PEDIGREE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33330 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME VALCARE, JORGE NAME STREET ADDRESS 13320 S.W. 110TH TERRACE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33186** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME DIMORO, JUANA NAME STREET ADDRESS 430 NE 141 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33161** ☐ Delete TITI F ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(i), Florida Statutes. I further certify that the information indicated on this report of 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 appowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Date

ith all other like empowered.