

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005432

1. Entity Name

SHEKINAH GLORY MINISTRIES INTERNATIONAL, INCORPO

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

05-24-2000 90073 006 \*\*\*\*61.25

Principal Place of Business

Mailing Address

6205 SOUTH DALE MABRY  
SUITE #5  
TAMPA FL 33611

6205 SOUTH DALE MABRY  
SUITE #5  
TAMPA FL 33611-4807

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3605282

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

SMITH, MOSE JR.  
7506 FRAGANCIA COURT  
TAMPA FL 33615

Name

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 ☐ Delete  
NAME P  
STREET ADDRESS SMITH, MOSE JR.  
CITY-ST-ZIP 7506 FRAGANCIA COURT  
TAMPA FL 33615

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

TITLE ☐ Delete  
NAME V  
STREET ADDRESS SMITH, MAXINE Y  
CITY-ST-ZIP 7506 FRAGANCIA COURT  
TAMPA FL 33615

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

TITLE ☐ Delete  
NAME S  
STREET ADDRESS VALDEZ, PERSEPHONIE L  
CITY-ST-ZIP 7738 N.W. 194TH STREET  
MIAMI FL 33015

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

TITLE ☐ Delete  
NAME TD  
STREET ADDRESS SMITH, MOSE III  
CITY-ST-ZIP 3913 E. IDLEWILD AVENUE  
TAMPA FL 33610

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS NANCIS, BERNARD  
CITY-ST-ZIP 6211 SO. DALE MABRY, APT. #1  
TAMPA FL 33611

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS QUARTERMAN, CHESTER  
CITY-ST-ZIP 7506 FRAGANCIA COURT  
TAMPA FL 33615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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:

*Mose Smith*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00  
Date

(813) 886-2105  
Daytime Phone #

CR2E037 (9/99)