

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006710

1. Entity Name

CHISPA UNITED METHODIST MISSION, INC.

FILED

May 10, 2000 8:00 am
Secretary of State

05-10-2000 90182 015 ***150.00

Principal Place of Business

BILTMORE PLAZA SHOPPING CENTER
10374 W. FLAGLER STREET
MIAMI FL

Mailing Address

BILTMORE PLAZA SHOPPING CENTER
10374 W. FLAGLER STREET
MIAMI FL 33174-1746

2. Principal Place of Business

N/A

3. Mailing Address

N/A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

APPLIED

☒ Applied For

☐ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TORRES, MARVIN
11430 SW 4TH STREET
MIAMI FL 33174

7. Name and Address of New Registered Agent

Name

N/A

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

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS TORRES, MARVIN
CITY-ST-ZIP 11430 S.W. 4TH STREET
MIAMI FL 33174

TITLE ☐ Delete
NAME D
STREET ADDRESS PEREZ, DANIEL
CITY-ST-ZIP 173 ALHAMBRA WAY
WESTON FL 33326

TITLE ☐ Delete
NAME D
STREET ADDRESS MORA, MAYDA M PASTOR
CITY-ST-ZIP 1921 S.W. 82ND PLACE
MIAMI FL 33155

TITLE ☐ Delete
NAME TD
STREET ADDRESS MILANES, MANUEL
CITY-ST-ZIP 280 WEST PARK DRIVE #202
MIAMI FL 33173

TITLE ☐ Delete
NAME SD
STREET ADDRESS DIAZ, LOIDA
CITY-ST-ZIP 301 WEST PARK DRIVE #103
MIAMI FL 33172

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAYDA M. MORA

Date

04-26-00

Daytime Phone #

305-261-5896