2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

N99000006710

1. Entity Name

CHISPA UNITED METHODIST MISSION, INC.



05/10/00 90182 015 \$150.00 ***\$27.50 OVERPAYMENT FROM 2000 UBR APPLIED TO 2003 UBR FILING. SPT Principal Place of Business Mailing Address BILTMORE PLAZA SHOPPING CENTER BILTMORE PLAZA SHOPPING CENTER 22000391 10374 W. FLAGLER STREET 10374 W. FLAGLER STREET MIAM! FL MIAMI FL 2. Principal Place of Business 3. Mailing Address 3024 N.W. 79 Avenue 3024 N.W. 79 Avenue OVERPAYMENT FROM 2001 APPLIED TO Suite, Apt. #, etc Suite, Apt. #, etc. 2003 UBRA SEHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-1025775 Miami, Florida Miami Florida Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33122 Dade 33122 Dade 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent... Name F. MORA TORRES, MARVIN Address (P.O. Box Number is Not Acceptable) 241 S.W. 13 Terrace 11430 SW 4TH STREET **MIAMI FL 33174** Zip Code 33144 Miami, Florida 8. The above named entity submission is statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registr SIGNATURE printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition TITLE TITLE Delete TORRES, MARVIN NAME NAME ANGEL F. MORA 8241 S.W. 13 ' Miami, F1. 33 STREET ADDRESS 11430 S.W. 4TH STREET STREET ADDRESS 13 Ter 33144 Terrace MIAMI FL 33174 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE PEREZ. DANIEL NAME NAME 173 ALHAMBRA WAY STREET ADDRESS STREET ADDRESS WESTON FL 33326 CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change Addition Mora, Mayda M Pastor NAME NAME STREET ADDRESS 1921 S.W. 82ND PLACE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33155 Addition Change TD Delete TITLE EDHER W. CIFUENTES MILANES, MANUEL NAME NAME 14280 S.W. 38 Street 280 WEST PARK DRIVE #202 STREET ADDRESS STREET ADDRESS 33175 Miami, Fl. CITY-ST-ZIP MIAMI FL 33173 CITY-ST-7IP TITLE Change ☐ Addition TITLE ☐ Delete MORALES, DEISY NAME 2635 SW 82ND AVE STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE 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 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 10 or Block 11 if of the corporation or the receiver or trustee changed, or on an attachment with an add

FILED Feb 03, 2003 8:00 am Secretary of State

02-03-2003 90141 005 ***150.00

SIGNATURE:

DITYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #