2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am Secretary of State DOCUMENT # P0000013518 05-15-2001 90069 006 ***150.00 RHEMA PUBLISHING, INC. Principal Place of Business Mailing Address 350 N. SEABOARD ROAD 350 N. SEABOARD ROAD MIAMI FL 33169 MIAMI FL 33169 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 15-046'175 Not Applicable Zin Country Zip 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 AUG. LAVAN, DANIEL Street Address (P.O. Box Number is Not Acceptable) 350 N. SEABOARD ROAD **MIAMI FL 33169** 350 M. Seabourd Road 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, typed or printed name of registered agent and title if applicable. (NQTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition PTD Delete TITLE TITLE mike williams 1901 Alahambra Bludi williams NAME NAME LAVAN, DANIEL STREET ADDRESS STREET ADDRESS 8126 NW 162ND STREET Miramar Aa. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33016** - President TITLE Г Спалое ☐ Delete TITLE NAME NAME LAVAN, CAROLYN 8126 NW 162 St STREET ADDRESS STREET ADDRESS **8126 NW 162ND STREET** miami Fla. 33016 CITY-ST-ZIF City-St-7tP **MIAMI FL 33016** reasure 12 Me President Change ☐ Addition TITLE SD.-----Delete TITI F exel Harriso MILLER, LESLIE ÑĀME NAME 1320 NW 17454. STREET ADDRESS STREET ADDRESS **6881 NW 45TH COURT** CITY-ST-ZIP CITY-ST-ZIP Miami Fla. LAUDERHILL FL 33319 ☐ Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS 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 acculate 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

ke empowered.

ME OF SIGNING OFFICER OR DIRECTOR

address, with all o

SIGNATURE AND TYPED OR PRINTED N

changed, or on an attachment with an

SIGNATURE:

CR2E034 (10/00)

FILED