2600 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000085941 Ebenezer Gospel Store, Inc. 00 SEP 14 AM 10: 56 SECRETARY OF STATE Principal Place of Business Mailing Address TALL/STAGGEL, FLORIDA 115 5.E. 1st Ave FL 33131 800003397998--2 🛭 -09/19/00--01037--018 \*\*\*\*150.00 \*\*\*\*150.00 ii. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 0867883 Applied For Not Applicable Zip 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 Edmar P. Seabra Street Address (P.O. Box Number is Not Acceptable) 115 SE 1 ave Miami, FL 33131 City 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 signsture required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOWIN FEE IS \$160.00 10. Election Campaign Financing \$5.00 May Be Tax along requirement and elects to do so. (See priteria on back) After MAY 1, 2000 Fee vitil be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change Addition Hedelea P. Gonzalez NAME 34 NE 2 QUE STREET ADDRESS STREET ADDRESS CHY-ST-ZIE Miami, FL 33131 CITY+S1-ZIP DITLE Delete 1016 M Addition Change Edmar P. Seabra NAME NAME 115 SE 1 ave STREET ADDRESS STREET ADDRESS CHY-ST-762 HIDMI, FL 33131 DITY-ST-ZIP TITLE D Delete Title Change Addition Marcia Pe Almeida NAME NAME STREET ADDRESS 34 NE 2 QUE. STREET ADDRESS CITY-ST-ZIE <u> Hiami, FL</u> 33131 CITY ST- ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DIRE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIF 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 air address, with all other like empowered. aman SIGNATURE: GNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

## EBENEZER GOSPEL STORE, INC. DOC.#P98000085941

Pg. 2052 Attachment P98000085941

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION. DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY EDMAR P. SEABRA
V-PRESIDENT