

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000802

1. Entity Name

ASSOCIATION OF BRAZILIAN BAPTIST CHURCHES OF NOR

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90018 042 ****61.25

Principal Place of Business

Mailing Address

4699 N FEDERAL HIGHWAY, S-208J
 POMPANO BEACH FL 33064

4699 N FEDERAL HIGHWAY, S-208J
 POMPANO BEACH FL 33064-6510

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

65-0866390

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALMEIDA, SILAIR COLETA
 4699 N FEDERAL HIGHWAY, S-208J
 POMPANO BEACH FL 33064

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

Silair Coleta Almeida

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/26/2000

**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 PD Delete
 NAME BEZERRA, JORGE
 STREET ADDRESS 24 CAMBRIDGE STREET
 CITY-ST-ZIP CHARLSTOWN MA 02129

TITLE PD MENDES CARLOS Change Addition
 NAME
 STREET ADDRESS 5671 NW WESTERN AV.
 CITY-ST-ZIP WASHINGTON DC 20015

TITLE VPD Delete
 NAME MENDES, CARLOS
 STREET ADDRESS 5671 N.W. WESTERN AVENUE
 CITY-ST-ZIP WASHINGTON DC 20015

TITLE VPD BILLY WESLEY Change Addition
 NAME
 STREET ADDRESS 298 SAN BRUN AV
 CITY-ST-ZIP BRISBANE, CA, 94005

TITLE VPD Delete
 NAME IZIDORO, FRANDISCO
 STREET ADDRESS 83-37 264TH STREET
 CITY-ST-ZIP FLORAL PARK NY 22040

TITLE VPD OPHIR DE BARROS Change Addition
 NAME
 STREET ADDRESS PO BOX 4515
 CITY-ST-ZIP DANVILLE, CT. 06813-4515

TITLE ESTD Delete
 NAME ALMEIDA, SILAIR COLETA
 STREET ADDRESS 2372N.W. 34TH ROAD
 CITY-ST-ZIP COCONUT CREEK FL 33066

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD Delete
 NAME SOUZA, MILTON
 STREET ADDRESS POST OFFICE BOX 415485 N/A
 CITY-ST-ZIP MIAMI FL 33141

TITLE SD ANDREA MONTANO Change Addition
 NAME
 STREET ADDRESS 335 ROBIN DR
 CITY-ST-ZIP CORTE MARINA, CA 94925

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD NEIZY FERREIRA Change Addition
 NAME
 STREET ADDRESS 4520 SEMINARY P# C
 CITY-ST-ZIP NEW ORLEANS - LA 70126

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:

Silair Coleta Almeida

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/2000

Date

Daytime Phone #

954-977-5821

CR2E037 (9/99)