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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000004657

1. Corporation Name

**LATIN-AMERICAN COUNCIL OF THE PENTECOSTAL CHURCH
OF GOD, INC.**

Principal Place of Business

1452 OSCEOLA PKWY.
SUITE B
KISSIMMEE FL 34744

Mailing Address

1452 OSCEOLA PKWY.
SUITE B
KISSIMMEE FL 34744



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

09/08/1994

4. FEI Number

13-3404962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

OTERO, ANGEL R.
4222 PARKSIDE DR.
ORLANDO FL 32812

10. Name and Address of New Registered Agent

81

Name

Otero Angel R.

82

Street Address (P.O. Box Number is Not Acceptable)

6005 Maussen Dr

83

84

City

Orlando

FL

85

Zip Code

32922

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ROMAN, SANTOS

STREET ADDRESS 95 PALSA AVE.

CITY-ST-ZIP ELMWOOD PARK NJ 07407

TITLE ☐ DELETE

NAME ROMAN, SANTOS

STREET ADDRESS 95 PALSA AVE.

CITY-ST-ZIP ELMWOOD PARK NJ 07407

TITLE ☐ DELETE

NAME ROMAN, SANTOS

STREET ADDRESS 95 PALSA AVE.

CITY-ST-ZIP ELMWOOD PARK NJ 07407

TITLE ☐ DELETE

NAME ROMAN, SANTOS

STREET ADDRESS 95 PALSA AVE.

CITY-ST-ZIP ELMWOOD PARK NJ 07407

TITLE ☐ DELETE

NAME SANTANA, JOSE M.

STREET ADDRESS 5032 DORETTA CT.

CITY-ST-ZIP ORLANDO FL 32807

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/21/99 407-2825925

CR2E037 (11/98)