

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716622

1. Entity Name

EBENEZER FREE WILL BAPTIST CHURCH, INC.

**FILED**  
**Jul 25, 2000 8:00 am**  
**Secretary of State**

07-25-2000 90002 012 \*\*\*\*70.00

Principal Place of Business

4111 SW 4TH ST.  
MIAMI FL 33134

Mailing Address

4111 SW 4TH ST.  
MIAMI FL 33134

A0063533



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4111 SW 4TH ST

3. Mailing Address

4236 SW 4TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

59-1370896

Applied For

Not Applicable

Zip  
33134

Country

Miami-Dade

Zip  
33134

Country

Miami-Dade

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RODRIGUEZ, BENITO  
4236 SW 4TH ST  
MIAMI FL 33134

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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  
NAME RODRIGUEZ, BENITO  
STREET ADDRESS 4236 SW 4TH ST  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME MIRELES, CARLOS  
STREET ADDRESS 5032 N.W. 188TH STREET  
CITY-ST-ZIP CORAL CITY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD  
NAME YERA, PEDRO  
STREET ADDRESS 10450 S.W. 5TH STREET  
CITY-ST-ZIP SWEETWATER FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE CD  
NAME IZQUIERDO, PEDRO J.  
STREET ADDRESS 7231 S.W. 13TH STREET  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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: Benito Rodriguez Benito Rodriguez 7-19-2000-305443-1992

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR21E037 (5/00)