2001 UNIFORM BUSINESS REPORT (UBR)

Apr 06, 2001 8:00 am & Secretary of State DOCUMENT # N95000002345 1. Entity Name IGLESIA EL SINAI. ASAMBLEA DE DIOS. INC. 04-06-2001 90009 011 ****61.25 Principal Place of Business Mailing Address 1801-B PORT MALABAR BLVD., N.E._ P.O. BOX-60037----PALM BAY FL 32905 PALM BAY FL 32905 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3565482 Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LUGO, LUIS F REV. 1801-B PORT MALABAR BLVD., N.E. PALM BAY FL 32905 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 signature required when reinstating) الرياس المركز الرياس الرياس المركز FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (10/00 TITLE Delete TITLE D ☐ Change Addition LUGO, LUIS F REV. NAME NAME PERLONI, GILBERTO 1639 FANNIN AVE. N.W. STREET ADDRESS STREET ADDRESS 1749 Glenridge Street NW CITY-ST-7IP CITY-ST-ZIP PALM BAY FL Palm Bay, Florida 32907° SD TITLE ☐ Delete TITLE Change Addition ACOSTA RIVERA, ANA NAME NAME RODRIGUEZ, MARICARMEN E. PO BOX 254366 STREET ADORESS STREET ADDRESS 806 Walpole RD SW CITY-ST-ZIP CITY-ST-ZIP PATRICK A F B FL 32925 Palm Bay, Florida 32908 Delete [3] Addition TITLE TITLE ☐ Change IRIZARRY, LUIS NAME NAME RIVERA, AMPARO 110 FRANTE STREET, N.E. STREET ADDRESS STREET ADDRESS 168 Rachel Street, Apt. CITY-ST-ZIP CITY-ST-7IP PALM BAY FL <u>Melbourne, Florida 32901</u> TITI F Delete TITLE Change Addition REYES, ALFREDO NAME NAME MARTINEZ, ANGELS STREET ADDRESS 1060 ZAMORA ST SE STREET ADDRESS 1281 Creel Road, NE CITY-ST-ZIP PALM BAY FL 32909 CITY-ST-ZIP Palm Bay, Florida TITI F Txt Delete TITLE Change ☐ Addition BORGES, KATHY NAME NAME STREET ADDRESS .1100 EMERSON DR., N.E. STREET ADDRESS CITY-ST-ZIP PALM BAY FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition REYES, CARMEN NAME NAME STREET ADDRESS 2478 SARNO ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32935

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/01 321-724-5249
Davime Phone *

FILED