

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90028 017 ****70.00

DOCUMENT # 731832

1. Entity Name

PENTECOSTAL CHURCH THE LIGHT OF THE WORLD



Principal Place of Business

Mailing Address

1142 N W 19TH ST
PO BOX 5692
FT LAUDERDALE FL 33310

1142 N W 19TH ST
PO BOX 5692
FT LAUDERDALE FL 33310



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0054945

Applied For

Not Applicable

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

MARMOLEJOS, VIRGILIO
222 ASPEN WAY
DAVIE FL 33325

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME MARMOLEJOS, VIRGILIO
STREET ADDRESS 222 ASPEN WAY
CITY-ST-ZIP DAVIE FL 33325

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

TITLE S ☐ Delete
NAME PERALTA, SAUL
STREET ADDRESS 501 NW 40 COURT
CITY-ST-ZIP OAKLAND PARK FL 33309

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

TITLE D ☒ Delete
NAME TORRES, OLGA
STREET ADDRESS 2001 NW 9TH AVE
CITY-ST-ZIP FORT LAUDERDALE FL 33311

TITLE ☐ Change ☐ Addition
NAME **DEACON**
Rosario G. Vallecillo
STREET ADDRESS **1745 NW. 60th Ave.**
CITY-ST-ZIP **SUNRISE FL 33313**

TITLE DT ☐ Delete
NAME MARMOLEJOS, NOELIA
STREET ADDRESS 222 ASPEN WAY
CITY-ST-ZIP DAVIE FL 33325

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

TITLE D ☐ Delete
NAME REYES, MARINA C
STREET ADDRESS 715 NE 46 COURT
CITY-ST-ZIP OAKLAND PARK FL 33334

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

TITLE **DEACON** ☐ Delete
NAME **Daniel Alvarado**
STREET ADDRESS **6135 S.W. 40th Street**
CITY-ST-ZIP **Miramar, FL 33023**

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

VIRGILIO Marmolejos 03-07-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #