

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003832

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC9687421601**

**Entity Name:** AGENCIA DE SERVICIOS SOCIALES PENTECOSTALES, INC.

**Current Principal Place of Business:**

12621 BALCOMBE RD  
ORLANDO, FL 32837

**Current Mailing Address:**

12621 BALCOMBE RD  
ORLANDO, FL 32837 US

**FEI Number:** 47-1761204

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

RINCON, LUIS ESR  
3862 BENTFORD CT  
ORLANDO, FL 32817 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            CEO  
Name            RINCON, LUIS E  
Address        3862 BENTFORD CT  
City-State-Zip: ORLANDO FL 32817

Title            PRES  
Name            RAMIREZ, CARLOS A  
Address        2201 GUADALUPE ST.  
City-State-Zip: KISSIMMEE FL 34743

Title            VICE  
Name            AGUILO, MIGUEL  
Address        2166 DUNSFORD TERRACE #2  
City-State-Zip: JACKSONVILLE FL 32207

Title            SECR  
Name            VEGA, GLADYS  
Address        3816 GOOSE CT.  
City-State-Zip: ORLANDO FL 32822

Title            TREA  
Name            LOPEZ, JESUS M  
Address        12340 HAMMOCK HILL DR  
City-State-Zip: CLERMONT FL 34711

Title            DIRECTOR  
Name            CHEVEREZ, SONIA  
Address        6311 WHITE SABAL PALM LN.  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            RODRIGUEZ, JOSE SR.  
Address        1121 S W 84 TERRACE  
City-State-Zip: PEMBROKE PINES FL 33025

Title            DIRECTOR  
Name            FONTANEZ, MARISOL  
Address        4940 HOFFNER AVE  
City-State-Zip: ORLANDO FL 32812

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JESUS M LOPEZ

**ED**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date