

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768085

1. Entity Name

SPANISH IGLESIA BAUTISTA EL CALVARIO, INC.

**FILED**  
**Feb 21, 2000 8:00 am**  
**Secretary of State**

02-21-2000 90022 021 \*\*\*\*61.25

Principal Place of Business  
1310 RED FOX RUN  
DELTONA FL 32725  
US

Mailing Address  
1310 RED FOX RUN  
DELTONA FL 32725  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2287665

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BELLO, TIM  
2281 WEATHERFORD DRIVE  
DELTONA FL 32738

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

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
BELLO, TIM  
2281 WEATHERFORD DRIVE  
DELTONA FL 32738

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VPD  
BETANCOURT, OSVALDO  
1137 BATON DRIVE  
DELTONA FL 32725

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

S  
GUZMAN, MARISOL  
3221 AMBLEWOOD CT  
DELTONA FL 32725

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

S  
MIRIAM SANABRIA  
819 LAUREL LEAF ST.  
ORANGE CITY, FL. 32763

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

ST  
SANABRIA, EFRAIN  
819 LAUREL LEAF ST  
ORANGE CITY FL 32763

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

T  
SANCHEZ, JOSEFINA  
2337 GREENBRIER STREET  
DELTONA FL 32738

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
VICENTY, SALVADOR  
1785 GILES ST  
DELTONA FL 32725

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

ST  
MIGUEL VEGA  
2463 BECK CIRCLE  
DELTONA, FL. 32738

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/00

Date

407-574-8768

Daytime Phone #

CR2E037 (9/99)