

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90151 032 ****70.00

DOCUMENT # 770733

1. Entity Name

IGLESIA BAUTISTA HISPANA DE WESTLAND, INC.

Principal Place of Business

Mailing Address

1550 W. 60TH ST.
 HIALEAH FL 33012-6259

1550 W. 60TH ST.
 HIALEAH FL 33012-6259

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2844712

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GARCIA, ANDRES K REV
2442 W. 71ST PL
HIALEAH FL 33016

7. Name and Address of New Registered Agent

Name **REV. ANGEL LOPEZ JR.**
 Street Address (P.O. Box Number is Not Acceptable)
13730 S.W. 32ST
MIAMI
 City **MIAMI** State **FL** Zip Code **33175**

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

[Handwritten Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

02-02-02

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

| | | |
|----------------|----------------------|--|
| TITLE | PCD | <input type="checkbox"/> Delete |
| NAME | LOPEZ, ANGEL JR, REV | |
| STREET ADDRESS | 13730 SW 32 ST | |
| CITY-ST-ZIP | MIAMI FL 33175 | |
| TITLE | SD | <input checked="" type="checkbox"/> Delete |
| NAME | CHAVEZ, IRIS | |
| STREET ADDRESS | 5731 W 21 AVE | |
| CITY-ST-ZIP | HIALEAH FL 33016 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | GRANADA, SILVIO | |
| STREET ADDRESS | 4800 NW 173 DR | |
| CITY-ST-ZIP | CAROL CITY FL 33055 | |
| TITLE | MD | <input type="checkbox"/> Delete |
| NAME | PEREZ, LILLY | |
| STREET ADDRESS | 17617 SW 32 ST | |
| CITY-ST-ZIP | MIRAMAR FL 33029 | |
| TITLE | DV | <input checked="" type="checkbox"/> Delete |
| NAME | ACOSTA, RAUL | |
| STREET ADDRESS | 18954 NW 67 PL | |
| CITY-ST-ZIP | MIAMI FL 33015 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | Angel Luis Lopez | |
| STREET ADDRESS | 695 W 28st #2 | |
| CITY-ST-ZIP | Hialeah, FL 33012 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------------|--|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | SD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ORLANDO GONZALEZ-DUEVEDO | |
| STREET ADDRESS | 389 W 64ST | |
| CITY-ST-ZIP | Hialeah, FL 33012 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ANDRES GARCIA REV. | |
| STREET ADDRESS | 2442 W 71ST PL | |
| CITY-ST-ZIP | Hialeah, FL 33016 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

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

02-03-02 305 822-9165

CR2E037 (9/01)