2001 UNIFORM BUSINESS REPORT (UBR)

Feb 03, 2001 8:00 am **DOCUMENT # 825115 Secretary of State** 1. Entity Name ASSEMBLY OF PENTECOSTAL CHURCH OF JESUS CHRIST. 02-03-2001 90298 047 ****61.25 Principal Place of Business Mailing Address 3452 W. NORTH AVENUE 3452 W. NORTH AVENUE CHICAGO IL 60647 CHICAGO IL 60647 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 51-0109562 51-0199562 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) QUINONES, GABINO REV New Address 4808 MALARKEY ST 9020 Black Bear Ln. ORLANDO FL 32808 Winter Garden, FL. 34787 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Addition ☐ Delete ☐ Change TORRES, OTONIEL REV NAME NAME STREET ADDRESS STREET ADDRESS 3837-W N AVE -- . . . CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60647 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MONCLOVA, PABLO REV NAME NAME STREET ADDRESS STREET ADDRESS CALLE 410 MI-23 CC CITY-ST-ZIP CAROLINA, PUERTO RICO 00983 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NUNEZ, REV. JUAN STREET ADDRESS 2649 W HIRSCH ST STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60622 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME MORENO, ANGEL L REV NAME STREET ADDRESS 2120 W MIDDLEMASS STREET STREET ADDRESS CITY-ST-ZIP MILWAUKEE WI CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GERENA, RAMON REV. NAME NAME STREET ADORESS 5759 W. 64TH PLACE STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60638 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition RAMOS, HECTOR L NAME NAME STREET ADDRESS 165 700 ROAD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **NEW OXFORD PA**

12. I hereby certify that the information supplied with this filling 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: Rev. O. C. L. L. L. REV. ANGERE MOYEND

SIGNATURE SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/2001 (773)862-6775