FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 24, 2002 8:00 am § Secretary of State DOCUMENT # F0000005041 1. Entity Name IGLESIA PENTECOSTAL Y MISIONERA, INC. 4-24-2002 90396 038 \*\*\*\*70.00 Principal Place of Business Mailing Address P.O. BOX 64 P.O. BOX 64 CAROLINA PR 00986 CAROLINA PR 00986 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 66-0459993 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 Name BETANCOURT, HERBERT Street Address (P.O. Box Number is Not Acceptable) 4337 PEBBLESTONE CT ORLANDO FL 32826 City 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. 2 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition NAME BETANCOURT, SANTIAGO NAME BETANCOURT?SANTIAGO STREET ADDRESS CARR 181 K.6 H.3 RAMAL 852 STREET ADDRESS CARR 181 K.6 H.3 RAMAL 852 CITY-ST-ZIP trujillo alto, pr 00976 CITY-ST-ZIP TRUJILLO ALTO PR 00976 VC. TITLE ☐ Delete TITLE CP VILA, ISRAEL NAME NAME VILA, ISRAEL STREET ADDRESS BO. CEIBA SUR CARR 198 INT 9937 K.O H.7 STREET ADDRESS BO.CEIBA SUR CARR 198 INT9937 CITY-ST-7/P LAS PIEDRAS, PR 00771-9619 CITY-ST-ZIP LAS PIEDRAS, PR 00771-☐ Delete TITLE VC Change ☐ Addition NAME FUENTES, PEDRO NAME FUENTES, PEDRO STREET ADDRESS SECTOR BAJA MEDIANIA BAJA STREET ADDRESS SECTOR BAJA°MEDIANIA BAJA CITY-ST-ZIP LOIZA PR 00772 CITY-ST-7IP LOIZA PR 00772 TITLE Delete TITLE ☐ Change ☐ Addition MARRERO, ELBA NAME NAME STREET ADDRESS BO. CEIBA SUR CARR 198 INT. 9937 STREET ADDRESS CITY-ST-ZIP LAS PIEDRAS PR 00771-9619 CITY-ST-7IP TITLE ☐ Delete TITLE Addition BETANCOURT, ANATOLIA NAME BETANCOURT, ANATOLIA STREET ADDRESS BO. CEIBA SUR CARR 198 INT. 9937 STREET ADDRESS CARR 181 K.6 H.3 RAMAL 852 CITY-ST-ZIP LAS PIEDRAS PR 00771-9619 CITY-ST-ZIP <u>TRUJILLO ALTO, PR 00976</u> TITI F Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS 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

SIGNATURE:

REQUIREDISRAEL VILA MANUTER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.