FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 29, 2002 8:00 am Secretary of State DOCUMENT # N0000001402 04-29-2002 90129 044 ****70.00 IGLESIA CRISTIANA, LA VINA DEL ESPIRITU SANTO, I NC. Principal Place of Business Mailing Address 9370 SUNSET DRIVE 14201 S.W. 57TH LANE *LINIT A -260 UNIT 2 MIAMI FL 33183 KAMI FL 33173 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0995113 Not Applicable Country \$8.75 Additional Zip Country M 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SALAZAR, DAISY 14201 SW 57TH LN #2 **MIAMI FL 33183** Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition TITLE ☐ Delete TITLE Eduardo Muñoz NAME RODRIGUEZ, THELMA NAME 10234 SW 9 Tem. STREET ADDRESS STREET ADDRESS 8761 SW 41ST ST 33174 Miani CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33165 ☐ Change Addition ☐ Delete TITLE DP TITLE NAME SALAZAR, LUIS F NAME STREET ADDRESS STREET ADDRESS 14201 S.W. 57TH LANE UNIT 2 CITY-ST-ZIP. CITY-ST-ZIP MIAMI FL 33183----Change Addition ☐ Delete TITLE TITLE Daisy H Salazar 14201 SW 57 M NAME NAME SALAZAR, DAISY H STREET ADDRESS STREET ADDRESS 14201 S.W. 57TH LANE UNIT 2 Miami, Fl 33183 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33183 Change ☐ Addition ☐ Delete TITLE TITLE NAME HOLBROOK, JOSEPH STREET ADDRESS STREET ADDRESS 25305 SW 136 CT CITY-ST-ZIP CITY-ST-ZIF PRINCETON FL 33032 Change ☐ Addition ☐ Delete TITLE JITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE

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

STREET ADDRESS

CITY-ST-ZIP

NAME

NAME

STREET ADDRESS

CITY-ST-ZIP