2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000006104

SIGNATURE:



FILED Mar 03, 2003 8:00 am § Secretary of State

IGLESIA	BAUTISTA NUEVA VIDA, INC.							
Principal Place of Business Mailing Address 6000 W. COLONIAL DRIVE IVAN DURAND ORLANDO FL 32808 9420 AZALEA RIDGE N GOTHA FL 34734							, 180	
2. Principal Suite, Apt	Pipe of Business Baptist Church #, etc.	3. Mailing Address 636 W. Ame Suite, Apt. #, etc.	036 W. Amelia 57.		CHECK HERE IF MAKING CHANGES			
City & Sta	Colonial DR ORTI	ORIANS	FI.	4. FE! Number	59-3727084		Applied For	
3280	8 Openage 6. Name and Address of Current R	32835	ORANGE	5. Certificate of		\$8.75 Ac Fee Requir		
DURAND 9420 AZ GOTHA I	, IVAN ALEA RIDGEWAY		Name / Street A	- 1. 1	Mio Kiùcko Nio Kiùcko Not Acceptable)	P		
The above named entity submits this statement for the purpose of changing its registered according to the obligations of registered according to the obligations. The obligation of the obligation of registered according to the obligation of the obligat				Delanda FL			Zip Code 32835	
SIGNATURE	Signature, typed or printed name of registered exent and	9. Election Ca	ampaign Financing	re required when reinstating) \$5.00 May Be	62 DAT	/28/03 eck Payable		
10,	OFFICERS AND DIRE		Contribution.	Added to Fees	Florida Dep		[
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOLANO, JIMMY 5430 CEDAR LANE ORLANDO FL 32811	Delete	TITLE	Esdeas Anton 6030 w.Amela	GES TO OFFICERS AND 100 RIULRA 51 32835	DIRECTORS IN Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OT MALDOMADO, MANNY 4876 CYPRESS WOODS DR # 325 ORLANDO FL 32811	W Delete	TITLE OT NAME STREET ADDRESS CITY-ST-ZIP	SOSUE FERRE	R .	Change	Addition	
	d Durand, Ivan 9420 Azalea Ridgeway	Delete	TITLE T NAME STREET ADDRESS	Segurolo Tala	TOR Inulant/13	Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GOTHA FL 34734	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Octando ST	<u> 318086</u>	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		***	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Change	☐ Addition	
of the corp	ertify that the information supplied with thi on this report or supplemental report is tru poration or the receiver or trustee empowe or on an attachment with an address, with	red to execute this report	ny signature snail na as required by Chap					