

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-24-2002 90271 005 ****61.25

DOCUMENT # N00000007246

1. Entity Name

TABERNACULO DE ORACION CRISTIANO, INC.

Principal Place of Business

Mailing Address

**4525 EAST 9TH COURT
HIALEAH FL 33013**

**4525 EAST 9TH COURT
HIALEAH FL 33013**

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

65-1055268

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PINEDA, LUIS A 4525 EAST 9TH COURT HIALEAH FL 33013	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO PINEDA, MARIA D 4525 EAST 9TH COURT HIALEAH FL 33013	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ABREU, FRANKLIN 4525 EAST 9TH COURT HIALEAH FL 33013	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANADO, MELVIN 4525 EAST 9TH COURT HIALEAH FL 33013	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DOBLADO, LOURDES 4525 EAST 9TH COURT HIALEAH FL 33013	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ANA CARDENAS 4525 E 9TH COURT HIALEAH, FLORIDA 33013	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/02

Date

Daytime Phone #

CR2037 (9/01)