2001 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 16 PM 7:35

DOCUMENT # N00000007848

1. Entity Name

Concilio Pentecostal Sinai INC

Principal Place of Business
8019 Van Dyke DL
Tampa FL 33604

Mailing Address
/

2. Principal Place of Business
Tampa FL
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
10220 N. 23rd St
Suite, Apt. #, etc.
Tampa FL 33612
City & State
Zip 33612
Country Hillsborough

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3682341 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Rev. Samuel Rivera
10220 N. 23rd St
Tampa FL 33612

7. Name and Address of New Registered Agent

Name Rev. Samuel Rivera
Street Address (P.O. Box Number Is Not Acceptable)
10220 N. 23rd St
City Tampa FL Zip Code 33612

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	T Pres. Rev. Samuel Rivera 10220 N. 23rd st tmp FL 3361 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200004655042--07 -10/26/01--01055--006
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sec. Melinda Olivo 13420 Sun Vale DL tpa FL 33624 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	*****61.25 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	I Trcs. Serito Rivera 10220 N. 23rd St Tpa FL 33612 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vocal Juan Celdas 1911 E. 149th Ave Lutz FL 33549 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037(11/00)

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: Rev. Samuel Rivera 9-10-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #