

2002 UNIFORM BUSINESS REPORT (UBR)

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

05-29-2002 93591 042 ****61.25

DOCUMENT # NO1000007769

1. Entity Name

IGLESIA BAUTISTA EL ALFARERO, INC.

Principal Place of Business

Mailing Address

**10932 S.W. 146TH PLACE
MIAMI FL 33186**

**10932 S.W. 146TH PLACE
MIAMI FL 33186**

2. Principal Place of Business

3. Mailing Address

P.O. BOX 835037

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI, FL

Zip

Country

Zip

Country

33283-5037

USA

4. FEI Number

65-1151343

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

MANUEL CHONG CUAN, JR., ESQ.

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

City

FL

Zip Code

**CUAN, MICHAEL C JR
1105 SW 87TH AVENUE
MIAMI FL 33174**

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 ☐ Delete
NAME **PD**
STREET ADDRESS **CUAN, MANUEL C JR**
CITY-ST-ZIP **1105 SW 87TH AVENUE
MIAMI FL 33174**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MARTINEZ, TERESA**
CITY-ST-ZIP **11264 SW 91 TERACE
MIAMI FL 33176**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **SD**
STREET ADDRESS **MONTANO, CONCEPCION**
CITY-ST-ZIP **7725 SW 127TH COURT
MIAMI FL 33183**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **TELLO, JORDAN**
CITY-ST-ZIP **871 E. 33RD STREET
HIALEAH FL 33013**

TITLE ☒ Change ☐ Addition
NAME **TELLO, YORDAN**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GARCIA, GLADYS**
CITY-ST-ZIP **15639 SW 73 CIRCLE TERRACE
MIAMI FL 33193**

TITLE ☒ Change ☐ Addition
NAME **GARCIA, GLADYS**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **LABREAU, NORMA**
CITY-ST-ZIP **4937 SW 135TH PLACE
MIAMI FL 33175**

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHONG CUAN, JR. 01/22/02

(305) 264-4542

Date

Daytime Phone #

CR2E037 (9/01)