

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90015 044 ****61.25

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1. Entity Name
IGLESIA BAUTISTA EL ALFARERO, INC.



Principal Place of Business
5859 SW 16 STREET
MIAMI, FL 33155

Mailing Address
PO BOX 835037
MIAMI, FL 33283-5037

54016557



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02102004 Chg-NP CR2E037 (10/03)

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

CUAN, MANUEL C JR, ESQ
1105 SW 87TH AVENUE
MIAMI, FL 33174

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE
NAME D
STREET ADDRESS CHONG, ANTHIA L.
CITY-ST-ZIP 11101 NW 71 Street
Doral, FL 33178 ☐ Change ☒ Addition

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

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

TITLE
NAME VD
STREET ADDRESS VIDAURRE, DAMASO
CITY-ST-ZIP 17400 NW 68 AVENUE #212
HIALEAH, FL 33015 ☐ Delete

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

TITLE
NAME DT
STREET ADDRESS SALGADO, DINORAH
CITY-ST-ZIP 559 E. 1 STREET
HIALEAH, FL 33010 ☐ Delete

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

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

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

M. CHONG LWA JR

3/4/04 (305) 264-4042

Date

Daytime Phone #