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

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FILED
Apr 14, 2003 8:00 am
Secretary of State
03-24-2003 91015 033 ****70.00

DOCUMENT # N02000000280

1. Entity Name
IGLESIA JOSUE - MANANTIALES DE VIDA ETERNA, INC.

Principal Place of Business	Mailing Address
30032 ORANGE AVE SORRENTO, FL 32776	30032 ORANGE AVE SORRENTO, FL 32776

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
#32441 C.R.437	P.O. BOX #451063
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Sorrento, Florida	KISSIMMEE, FLORIDA
City & State	City & State
Zip: 32776 Country: U.S.A.	Zip: 34745 Country: U.S.A.

4. FEI Number: 06-1687225 ☐ 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
MOLINA, CARMEN L 1507 PETALOMA DR ORLANDO, FL 32817	Name: LIZETTE MOLINA Street Address (P.O. Box Number is Not Acceptable): #2208 DONEGAN PL. City: ORLANDO FL Zip Code: 32826

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: LIZETTE MOLINA Lizette Molina 3-7-03
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing) 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: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ORELLANA, JOSE M 2401 PLACETAS CT KISSIMMEE, FL 34743	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOLINA, LIZETTE M 2208 DONEGAN PLACE ORLANDO, FL 32826	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEREZ, NELLY 30042 PALM AVE SORRENTO, FL 32776	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (10/02)

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: JOSE M. ORELLANA 3-7-03 PH 407 716-2281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #