

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 27, 2005 08:00 AM  
Secretary of State

DOCUMENT # N02000006752

1. Entity Name  
IGLESIA DE DIOS RESTAURACION IN KISSIMMEE, INC.



Principal Place of Business  
1001 CARROLL ST  
KISSIMMEE, FL

Mailing Address  
PO BOX 451055  
KISSIMMEE, FL 34745



04102005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-3762704

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

LEBRON, LUCAS  
1930 PERRDOT CIR.  
KISSIMMEE, FL 34743

DO NOT WRITE  
IN THIS SPACE

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, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
LEBRON, LUCAS  
1930 PERRDOT CIR.  
KISSIMMEE, FL 34743

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
SANCHEZ, NELIDA  
1930 PERRIDOT CIR.  
KISSIMMEE, FL 34743

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
OCASIO, IVETTE  
2661 E STEWART ST  
KISSIMMEE, FL 34746

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CAMACHO, JAIME  
2661 S STEWART ST  
KISSIMMEE, FL 34746

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000337173  
04/27/05-80156-019 70.00

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Lucas Lebron  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/05 (407)376-4909  
Date Daytime Phone #