

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

APPROVED
AND
FILED

03 JUN 27 PM 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

X



05/13/03 90053-003 \$70.00

DOCUMENT # N02000007117

1. Entity Name
IGLESIA DE DIOS PUERTA ABIERTA IN RUSKIN, INC.



Principal Place of Business Mailing Address

**310 1ST STREET N
UNIT C
RUSKIN, FL 33570**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

**1706 Meridian St
Ruskin FL
33570**

6. Name and Address of Current Registered Agent

**PINA, JOSE
1706 MERIDIAN STREET
RUSKIN, FL 33570**

7. Name and Address of New Registered Agent

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 *X* *Jose P. Pina* DATE **5-5-03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW - FEES \$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	
TITLE	PD ☐ Delete
NAME	PINA, JOSE
STREET ADDRESS	1706 MERIDIAN STREET
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	STD ☐ Delete
NAME	NARVAEZ, ARTURO
STREET ADDRESS	1408 14TH STREET CT W
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D ☐ Delete
NAME	GARCIA, FIDEL JR.
STREET ADDRESS	108 6TH AVENUE NW
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	D ☐ Delete
NAME	BALDERAS, VICTOR
STREET ADDRESS	1328 ATLANTIC DRIVE
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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)(l), 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: *X* *Jose P. Pina* DATE **5-5-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)

As per Demetria Martinez