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

## Sep 12, 2003 8:00 am Secretary of State DOCUMENT # N0200007844 09-12-2003 90093 028 \*\*\*\*61.25 IGLESIA DE DIOS PENIEL IN OVIEDO, INC. Principal Place of Business Mailing Address 300 W MITCHELL HAMMOCK RD 300 W MITCHELL HAMMOCK RD OVIEDO FL 32765 OVIEDO FL 32765 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-1169843 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6...Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent --TORRES, JOSE D Street Address (P.O. Box Number is Not Acceptable) 2428 LONG MEADOW WAY ORLANDO FL 32817 Zip Code City 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. After September 10, 2003, min will be \$236.25 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition TORRES, JOSE D NAME NAME STREET ADDRESS 2428 LONG MEADOW WAY STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32817 CITY-ST-ZIP DS ☐ Change ☐ Addition TITLE ☐ Delete TITLE LACEN, NANCY NAME NAME **501 ROYAL TREE LN** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OVIEDO FL 32765 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change AROCHO, EUCLIDES STREET ADDRESS 2428 LONG MEADOW WAY STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32817 CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change ETIENNE, LOUIS A NAME NAME STREET ADDRESS 1025 DEES DR STREET ADDRESS CITY-ST-ZIP OVIEDO FL 32765 CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

407-682-1556