

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90098 003 ****61.25

DOCUMENT # N04000005315

1. Entity Name
TEMPLO ALELUJAH DE ORLANDO CORP.



Principal Place of Business
P O BOX 149768
ORLANDO, FL 32814

Mailing Address
P O BOX 149768
ORLANDO, FL 32814

40101014



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

5240 E. Colonial Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5240 E. Colonial Dr.

Suite D

City & State

City & State

Orlando Fla

Orlando Fla

Zip

Country

Zip

Country

32807

32807

04292007 Chg-NP CR2E037 (12/06)

4. FEI Number
34-2021152

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TAMAYO, ANTONIO
1213 TRUMAN RD
ORLANDO, FL 32807

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

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, 2007

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
NAME PD
STREET ADDRESS TAMAYO, ANTONIO
CITY-ST-ZIP 1213 TRUMAN RD
ORLANDO, FL 32807 ☐ Delete

TITLE
NAME V
STREET ADDRESS RIVERA, MIRIAM
CITY-ST-ZIP 4056 PONDEROSA DR
ORLANDO, FL 32822 ☐ Delete

TITLE
NAME TD
STREET ADDRESS TAMAYO, MIRIAM
CITY-ST-ZIP 1213 TRUMAN RD
ORLANDO, FL 32807 ☐ Delete

TITLE
NAME S
STREET ADDRESS TAMAYO, MARCIA
CITY-ST-ZIP 1213 TRUMAN RD
ORLANDO, FL 32807 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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 exemptions contained in Chapter 119, 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:

ANTONIO TAMAYO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-28-07
Date

407-2471928
Daytime Phone #