

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012073

FILED  
Jul 13, 2005  
Secretary of State

**Entity Name:** IGLESIA CENTRAL HISPANOAMERICANA UNITED PENTECOSTAL CHURCH INC.

**Current Principal Place of Business:**

394 NOTRE DAME DRIVE  
ALTAMONTE SPRINGS, FL 32714-411

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 3809 WEST FLAGLER STREET  
MIAMI, FL 33134

**New Mailing Address:**

394 NOTRE DAME DRIVE  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 20-2112829      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GONZALEZ, HECTOR H  
394 NOTRE DAME DRIVE  
ALTAMONTE SPRINGS, FL 32714      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GONZALEZ, HECTOR H  
Address: 394 NOTRE DAME DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TR      ( ) Delete  
Name: TORTOSA, JEAN  
Address: 227 SHERRY AVENUE  
City-St-Zip: WINTER SPRINGS, FL 32714

Title: SEC      ( ) Delete  
Name: TRUJILLO, MARCELO  
Address: 3229 ST LUCIE DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR H GONZALEZ

P

07/13/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date