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2001 UNIFORM BUSINESS PEPORT (UBR)

Jun 29, 2001 8:00 am § Secretary of State DOCUMENT # N12426 06-29-2001 90004 021 ****70 00 IGLESIA CRISTIANA EL BUEN SAMARITANO, INC. Principal Place of Business Mailing Address 25795 SW 137 AVENUE 25795 SW 137 AVENUE PRINCETON FL 33032 PRINCETON FL 33032 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite. Apt. #. etc. Applied For City & State City & State 4. FEI Number 59-2839224 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Rosa Figueroa Street Address (P.O. Box Number is Not Acceptable) FIGUEROA, ROSA 1451 N E 10TH STREET **HOMESTAED FL 33030** 1451 N.E. 10 Street Zip Code 33030 Homestead 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. Rosa Figueroa 6/25/01 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ☐ Change *X*Addition NAME URGELLES, MELQUIADES Francisca Arnal STREET ADDRESS STREET ADDRESS 25851 S.W. 133 CT. 13340 S.W. 257 Terr. CITY-ST-ZIP CITY-ST-ZIP PRINCETON FL 33032 Princeton, FL 33032 TITLE ☐ Delete TITLE Change **XAddition NAME **URGELLES, WILMER** NAME Americo Otero STREET ADDRESS STREET ADDRESS 15104_S_W_298TH_TERRACE__ 1586 N.W. 17 Terr. CITY-ST-ZÎP CITY-ST-ZIP LEISURE CITY FL 33033 Princeton, FL 33032 TITLE Change ☐ Addition Delete TITLE FIGUEROA, ROSA NAME NAME STREET ADDRESS STREET ADDRESS 1451 N.E. 10TH ST. CITY-ST-ZIP CITY-ST-ZIP HOMESTEAD FL 33030 Change ☐ Addition □ Delete TITLE TITLE HOLGUIN, AUREO R NAME NAME STREET ADDRESS STREET ADDRESS 25071 S.W. 124 PL CITY-ST-ZIP CITY-ST-ZIP PRINCETON FL 33032

PRINCETON FL 33032 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

TITLE

NAME

TITLE

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CITY-ST-ZIP

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PEREZ, CESAR

25915 S.W. 123 AVE

PRINCETON FL 33032

urgelles, mel**q**uis

25641 S.W. 132 AVE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

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REQUIRMeTquiades Urgelles 6/25/01 305 258-0162 SIGNATURE: