

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90378 018 ****61.25

DOCUMENT # N15847

1. Entity Name

**IGLESIA CRISTO ROMPE LAS CADENAS DEL EVANGELIO C
OMPLETO, INC.**



Principal Place of Business

**3899 N.W. 7TH STREET
SUITE 216
MIAMI FL 33126
US**

Mailing Address

**3899 N.W. 7TH STREET
SUITE 216
MIAMI FL 33126
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2693858**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**ABDO, GEORGE B.
3899 N.W. 7TH ST STE 216
MIAMI FL 33126**

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

FILE NOW: FEE IS \$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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	ABDO, GEORGI B	410 S.W. 136TH PLACE	MIAMI FL 33114	<input type="checkbox"/>	<input type="checkbox"/>
VD	CALVEIRO, JULIO	5020 N.W. 188TH TERRACE	MIAMI FL	<input type="checkbox"/>	<input type="checkbox"/>
VD	CASTELLON, RODOLFO	235 E. 7TH STREET	HIALEAH FL 33012	<input type="checkbox"/>	<input type="checkbox"/>
STD	PONS, GLADIS	225 N.W. 32ND COURT	MIAMI FL 33125	<input type="checkbox"/>	<input type="checkbox"/>
VTD	OTERO, OBED	10017 EASTERN LAKE AVE. #104	ORLANDO FL 32817	<input type="checkbox"/>	<input type="checkbox"/>
VSD	JIRON, ORLANDO J	8650 SW 137 AVE RD	MIAMI FL 33186	<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE:

SIGNATURE REQUIRED

01/20/03

35-649-6811

CR2E037 (10/02)