

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18105

1. Entity Name

IGLESIA PENTECOSTAL CORONA DE VIDA ALPHA & OMEGA

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90110 016 ****61.25

Principal Place of Business

Mailing Address

% REV HECTOR RIVERA
4441 TIFFIN AVENUE
SPRINGHILL FL 34609
US

% REV HECTOR RIVERA
4441 TIFFIN AVENUE
SPRINGHILL FL 34609-1956
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3005153

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIVERA, HECTOR
4441 TIFFIN AVE
SPRINGHILL FL 34609

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME RIVERA, HECTOR
STREET ADDRESS 4441 TIFFIN AVENUE
CITY-ST-ZIP SPRINGHILL FL ☐ Delete

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

TITLE SV
NAME SANTOS, MICHELLE
STREET ADDRESS 8225 PAGODA DRIVE
CITY-ST-ZIP SPRING HILL FL 34606 ☐ Delete

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

TITLE PD
NAME RODRIGUEZ, PABLO
STREET ADDRESS 10248 NODDY TEN RD
CITY-ST-ZIP BROOKSVILLE FL ☐ Delete

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

TITLE D
NAME RIVERA, ANNA
STREET ADDRESS 7289 APACHE TRAIL
CITY-ST-ZIP SPRING HILL FL ☐ Delete

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

TITLE ST
NAME ACEVEDO, ENEIDA
STREET ADDRESS 10322 BANNOKF ST
CITY-ST-ZIP SPRING HILL FL 34608 ☐ Delete

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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.

SIGNATURE: X

NOTARIAL SIGNATURE REQUIRED
HECTOR RIVERA Pres. 5/30/00

Date

Daytime Phone #

CR2E037 (9/99)