2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N21912** 02 SEP -9 PM 12: 31 1. Entity Name IGLESIA BAUTISTA FUNDAMENTAL HISPANA, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business H 19 89 8 7 7 243 SUNSHINE DR 6950 ROYAL PALM BLVD. COCONUT CREEK FL 33068 MARGATE FL 33063 2. Principal Place of Business 3, Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0028991 Not Applicable \$8.75 Additional Country Zip Country Zio 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HERRERA, FERNANDO 243 SUNSHINE DR **COCONUT CREEK FL 33066** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to After September 13, 2002, Trust Fund Contribution. Department of State Added to Fees min. will be \$236.25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (4/02)☐ Addition Change ☐ Deteta TITLE TITLE NAME HERRERA, FERNANDO NAME **CR2E037** STREET ADDRESS STREET ADDRESS 243 SUNSHINE DR CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL 33066 ☐ Chance ☐ Addition Delete TITLE TITLE ARNULFO, ALONZO NAME NAME STREET ADDRESS STREET ADDRESS 732 SW 73 AVE. CITY-ST-ZIP CITY-ST-ZIP N. LAUDERDALE FL 33068 ☐ Addition ☐ Delete TITLE TITLE NAME NICOLAS, OSTAPCHUCK NAME STREET ADDRESS STREET ADDRESS 267 SUNSHINE DR.

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 a natachment with an address, with all other like empowered.

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COCONUT CREEK FL

ESCOBAR, NARCISO

6621 BLD 4 CHOPIN

MARGATE FL 33068

6267 S.W.

CARLOS LOPEZ

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08/20/02

(954)419-19<del>3</del>9

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