

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N26544

FILED  
Apr 17, 2003  
Secretary of State

**Entity Name:** MISIONES PENTECOSTALES LATINOAMERICANAS, INC.

## Current Principal Place of Business:

C/O EMILIANO GONZALEZ  
1710 NW 7TH STREET  
MIAMI, FL 33125

## New Principal Place of Business:

C/O EMILIANO GONZALEZ  
2639 NW 20 STREET  
MIAMI, FL 33142

## Current Mailing Address:

C/O EMILIANO GONZALEZ  
4320 NW 198TH TERRACE  
MIAMI, FL 33055

## New Mailing Address:

FEI Number: 65-0089439      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, EMILIANO  
4320 NW 198TH TERRACE  
MIAMI, FL 33055

## Name and Address of New Registered Agent:

MISIONES LATINOAMERICANAS PENTECOSTALES  
4320 NW 198TH TERRACE  
MIAMI, FL 33055

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: EMILIANO GONZALEZ

04/17/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GONZALEZ, EMILIANO,  
Address: 4320 NW 198 TERRACE  
City-St-Zip: CAROL CITY, FL

Title: VD ( ) Delete  
Name: GONZALEZ, HIRALDINA,  
Address: 4620 NW 198 TERRACE  
City-St-Zip: CAROL CITY, FL

Title: S ( ) Delete  
Name: LOBO, MARTHA  
Address: 1051 SW 74 AVENUE  
City-St-Zip: MIAMI, FL 33144

Title: TD ( ) Delete  
Name: RIOS, DEBORAH  
Address: 430 NW 103 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: RIOS, FRANCISCO J  
Address: 430 NW 103 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33026

## 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:

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: EMILIANO GONZALEZ

PD

04/17/2003

Electronic Signature of Signing Officer or Director

Date