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

## **DOCUMENT # N40622**

1. Entity Name

## WORSHIP AND PRAISE CENTER, INC./ CENTRO DE ADORA CION Y ALABANZA



FILED
Mar 17, 2003 8:00 am §
Secretary of State

03-17-2003 90103 017 \*\*\*\*61.25

						OU WE S				
Principal Pla	ce of Busines	is	Maili	ing Address	•					
5016 DUBIN AVENUE P ORLANDO FL 32-8129 OF			POI	BOX 592095 NDO FL 32809			1 10011181 811 010	II BOKA BIRIB KAKA JIDI PISKA	<b>a</b> li <b>a</b> l <b>a</b> li <b>a</b> lali al	O TO O T
2. Principal Place of Business 3. Ma				Mailing Address						
Suite, Apt. #, etc.				Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State				City & State			4. FEI Number 59-3055781 Applied For Not Applicable			
Zip Country			Z	Zip		try	5. Certificate of Status Desired S8.75 Additional Fee Required			
_	6. Name	and Address of Current	Register	ed Agent	, , <u>-</u>	متسبباء إلمسرسي	- 7. Name and Addr	ess of New Registered	Agent	
						Name				
COLON, RAYMOND					Ĺ	Ctroot Addroos	a (D.O. Bay Niyerbay is Ni	\-\-\-\-\-\-\-\-\-\-\-		
1743 BENTWAY COURT						Street Address	s (P.O. Box Number is No	ot Acceptable)		
ORLANDO,F L FL 32818										
					}	City		FI	Zip Coo	le
8. The above	e named entit	y submits this statement fo	r the our	page of changing its	ragintaras	d office or regist	torod agent or both in th		_	
the obliga	tions of regist	ered agent.	i ine puri	pose of changing its	registered	office of regist	tered agent, or both, in the	le State of Florida. I am	Tamiliar with,	and accept
<b>S</b>					:	i, the				
SIGNATU					•					
1	Signature, typed	or printed name of registered agent	and title if ap	plicable." (NOTE	: Registered	Agent signature requi	red when reinstating)	DATE		
FILE NOW: FEE IS \$61.25 9. Election Campai							\$5.00 May Be	Make Ched		
	Frust Fund Ci	Trust Fund Contribution.			Added to Fees Florida Department of State					
10.		OFFICERS AND DIF	RECTORS	<u></u>	11.		ADDITIONS/CHANGE	S TO OFFICERS AND D	IDECTORS IN	110
TITLE	DP STEED OF THE BINESTONS			☐ Delete	TITLE	1	7.00THONG) OFFANGE	5 TO OTTICE IS AND D	☐ Change	Addition
NAME	COLON, R	AYMOND		La Delete	NAME				Li Change	
STREET ADDRESS		T WAY COURT				ADDRESS				
CITY-ST-ZIP	ORLANDO	FL			CITY-S	T-ZIP				
TITLE	DV			☐ Delete	TITLE		· · · · ·		Change	☐ Addition
NAME	ORTIZ, OR	RLANDO		_ Buille	NAME	ŀ			Onange	Addition
STREET ADDRESS	3943 PINT				STREET	ADDRESS				,
CITY-ST-ZIP	ORLANDO			المراج والمحافظية والمراد المراد	CITY-S	T-ZĪP	the st	~ · · ·		
TITLE	DST			☐ Delete	TITLE				☐ Change	Addition
NAME	COLON, E	Lizabeth			NAME					
STREET ADDRESS	1743 BEN	T WAY CT			STREET	ADDRESS				
CITY-ST-ZIP	ORLANDO	FL			CITY-S	T-ZIP				
TITLE	D			☐ Delete	TITLE			- 1	☐ Change	☐ Addition
NAME	ALDEBOL,				NAME		**			_
STREET ADDRESS	6572 MERI	TMOOR CIRCLE			STREET	ADDRESS				1
CITY-ST-ZIP	ORLANDO	FL 32818			CITY-S	- ZIP				
TITLE	D			Delete	TITLE		-		☐ Change	☐ Addition
NAME	HANCE, A				NAME	Į				1
STREET ADDRESS		ERBEND CIRCLE				ADDRESS				
CITY-ST-ZIP	ORLANDO	FL 32824			CITY-S	- ZIP				
TITLE				Delete	TITLE				☐ Change	☐ Addition
NAME					NAME					1
STREET ADDRESS CITY-ST-ZIP						ADDRESS				l
12   Lboroby	Ĺ				CITY-S1	-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:

Ballan Colon

3/11/03 407-854-5798