

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N41449

1. Entity Name

IGLESIA BAUTISTA LIBRE RENACER, INC.

FILED

Feb 20, 2001 8:00 am
Secretary of State

02-20-2001 90067 012 ****61.25

Principal Place of Business

Mailing Address

349 SW 12ST.
MIAMI FL 33130
US

349 S.W. 12TH STREET
MIAMI FL 33130
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

65-0189834

Applied For

Not Applicable

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

RODRIGUEZ, JOSE L
30 NW 87 AVE #C-105
MIAMIA FL 33172

Name Alfaro, Pedro M.

Street Address (P.O. Box Number is Not Acceptable)

11400 SW 196 ST

City Miami

FL

Zip Code 33157

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 NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, JOSE L 1751 S.W. 21 TERRACE MIAMI FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VESTIA, NOEMI 8185 NW 85ST F6 MIAMI FL 33172	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ALFARO, PEDRO M 11400 S W 196TH STREET MIAMI FL 33157	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALFARO, MARIA L 8331 S W 19TH STREET MIAMI FL 33155	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Alfaro, Israel 11842 SW 207 Street Miami, FL 33177	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Mesa, Misael 2204 W 74 ST #202 Hialeah, FL 33016	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD Rodriguez, Maria 870 NW 87 Ave #203 Miami, FL 33172	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-12-01 (786) 242-2280

CR2E037 (10/00)