2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 26, 2002 8:00 am
Secretary of State
06-11-2002 90398 021 ****70.00
09-10-2002 90236 021 ****61.25

DOCUMENT # N41449

1. Entity Name

IGLESIA BAUTISTA LIBRE RENACER, INC.

Principal Place of Business	Mailing Address
349 SW 12ST MIAMI FL 33130 US	349 S.W. 12TH STREET MIAMI FL 33130 US

- 43046

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
349 S.W 12st	349 S.W 12st
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami. Fla	City & State: Miami Fla
Zip: 33130 Country: USA.	Zip: 33130 Country: USA.

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
ALFARO, PDREO M 11400 SW 196 STREET MIAMI FL 33157	Name: Gustavo Abreira Street Address (P.O. Box Number is Not Acceptable): 741 N.W 45 Ave #31 City: Miami. Fla. FL Zip Code: 33126

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: GAbreira PASTOR. 09-23-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

After September 13, 2002, min. will be $236.25.

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	CD ALFARO, ISRAEL 11842 SW 207 STREET MIAMI FL 33177	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Gustavo Abreira 741 N.W 45 Ave #31 Miami. Fl. 33126	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MESA, MISAEL 2204 W 74 STREET # 202 HIALEAH FL 33016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Blanca Nieve Alfaro 11831 S.W 206 Terra Miami- Fl 33177	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD RODRIGUEZ, MARIA 870 NW 87 AVENUE # 203 MIAMI FL 33172	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Sarah E. Noyra 120 N.E 9 Ave Hialeah. Fl 33010	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD Pedro ALFARO 11400 S.W 196 St Miami. Fl 33157	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (4/02)

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: GAbreira Gustavo Abreira 9/5/02 (305)868-1185
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #