2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 25, 2001 8:00 am Secretary of State DOCUMENT # N44062 1. Entity Name IGLESIA CRISTIANA EL NUEVO PACTO, INC. 01-25-2001 90138 033 ****70.00 Principal Place of Business Mailing Address 6029 THERESA RD. % ESTHER GONZALEZ **TAMPA FL 33615** 14918 GREELEY DR. 00009468 US **TAMPA FL 33625** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3074743 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GONZALEZ, ESTHER 14918 GREELEY DR. **TAMPA FL 33625** Zip Code FL 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) **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GONZALEZ, ESTHER NAME STREET ADDRESS STREET ADDRESS 14918 GREELEY DR. CITY-ST-ZIP TAMPA FL CITY-ST-7IP DSVP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PELCASTRE, CRISTOBAL NAME NAME STREET ADDRESS STREET ADDRESS 9711 HICKORY PLACE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL DST TITLE X Delete TITLE TREASUrer **Change** Addition ALBA GONZALEZ -NAME : gonzalez, alba-NAME STREET ADDRESS 14918 GREELEY DR. STREET ADDRESS 14918 Greeley DR CITY-ST-ZIP CITY-ST-ZIP TAMPA FL TAMPA FL 33625 DSQ TITLE **★** Delete TITLE SECRETARY Change ☐ Addition Ivette SotomAyor SOTOMAYOR, LVETTE NAME NAME STREET ADDRESS 13612 S. VILLAGE DR 13612 S VILLAGE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL FL 33624 TAMPA TITLE ☐ Delete Change Addition CRUZADO, JORGE NAME NAME STREET ADDRESS 5118 LESTLER CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33624** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

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changed, or on an attachment with an address, with all other like empowered.

1-9-2001 813-963-7786