

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46087

1. Entity Name

IGLESIA CRISTIANA MAS QUE VENCEDORES INC.

Principal Place of Business

Mailing Address

5480 N. ST RD 7  
215-216  
FT. LAUDERDALE FL 33319

PO BOX 23283  
FT. LAUDERDALE FL 33307

2. Principal Place of Business

1041 NW 7 Ave.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

City & State

4. FEI Number

65-0296202

Applied For

Not Applicable

Zip

Country

Zip

Country

33319

U.S.A.

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

MARRERO, MARIO

5480 N. STATE RD 7 #215-216  
FT. LAUDERDALE FL 33319

7901 N.W. 71 CT  
TAMARAC, FL 33321

Name

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

7901 N.W. 71 CT.

City

TAMARAC

FL

Zip Code

33321

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 ☐ Delete  
P MARRERO, MARIO  
STREET ADDRESS 7901 NW 71 CT  
CITY-ST-ZIP TAMARAC FL

TITLE NAME ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☒ Delete  
T ESCRIBANO, JUAN  
STREET ADDRESS 1100 19 ST  
CITY-ST-ZIP FT LAUDERDALE FL 33311

TITLE NAME ☒ Change ☐ Addition  
Hilda Fuigueras A  
STREET ADDRESS 5145 Island Club dr.  
CITY-ST-ZIP TAMARAC FL 33319

TITLE NAME ☐ Delete  
S MARRERO, MARTA  
STREET ADDRESS 7901 NW 71 CT  
CITY-ST-ZIP TAMARAC FL 33321

TITLE NAME ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
T FUIGUEROA, MARCELINO  
STREET ADDRESS 5134 ISLAND CLUB DR  
CITY-ST-ZIP TAMARAC FL 33319

TITLE NAME ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☒ Delete  
T ESCRIBANO, JUAN  
STREET ADDRESS 1100 NW 19TH ST  
CITY-ST-ZIP FT. LAUDERDALE FL 33311

TITLE NAME ☒ Change ☐ Addition  
Jose Fuigueras A  
STREET ADDRESS 5831 Island Club drive  
CITY-ST-ZIP TAMARAC FL 33319

TITLE NAME ☒ Delete  
T ESCRIBANO, WANDA  
STREET ADDRESS 1100 NW 19 ST  
CITY-ST-ZIP FT. LAUDERDALE FL 33311

TITLE NAME ☒ Change ☐ Addition  
Glenda Cordova  
STREET ADDRESS 7901 N.W. 71 CT.  
CITY-ST-ZIP TAMARAC FL 33321

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 empowerment.

SIGNATURE:

*Signature and Typed Name of Signing Officer or Director*

Date

Daytime Phone #

4/21/02

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DO NOT WRITE IN THIS SPACE

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