**FILED**
**Jun 09, 2003 8:00 am**
**Secretary of State**
05-08-2003 90176 031 ****75.00

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

DOCUMENT # N46087

1. Entity Name

IGLESIA CRISTIANA MAS QUE VENCEDORES, INC.

**DO NOT WRITE IN THIS SPACE**

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DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 1041 NW 7th Ave. | POB 23283 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: FT. LAUDERDALE, FL | City & State: FT. LAUDERDALE, FL |
| Zip: 33311 Country: BROWARAD | Zip: 33307 Country: USA |

4. FEI Number: 65-0296202 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name: MARIO MARRERO

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PRESIDENT, PASTOR<br>MARIO MARRERO<br>1041 NW 7th Ave. FT. LAUDERDALE, FL. |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>Marcelino Figueroa<br>5145 Island Club Dr.<br>Tamarac Fl. 33319 |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Marta-Marrero<br>7901 N.W. 71 CT<br>Tamarac Fl. 33321 |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Glenda Cordova<br>7901 N.W. 71 CT<br>Tamarac Fl. 33321 |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>Hilda Olmeda Figueroa<br>5145 Island Club Dr.<br>Tamarac Fl. |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Gustavo Marrero<br>24181 S.W. 217 St<br>Homestead Fl. 33031 |

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CR2E037B (12/02)

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

SIGNATURE: Mario Marrero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #