

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90092 027 ****70.00

DOCUMENT # **N93000000085**

1. Entity Name

Iglesia Cristiana EL Tabernaculo de Kendall, A.D

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12215 SW 112th St.

Suite, Apt. #, etc.

3. Mailing Address

12215 SW 112th St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Florida

Zip

33186

Country

City & State

Miami FL 33

Zip

33186

Country

4. FEI Number

05-0381013

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Elias Cueto

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

7951 NW 197 street

City

Miami

FL

Zip Code

33186

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IN THIS SPACE**

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

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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PD
Cueto, Elias
7951 NW 197 street
Miami, FL 33015**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VD
Saer, Betty
11501 SW 84th St.
Miami, FL 33173**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**S/T
Tucker, Penelope
14148 SW 160 Ave
Miami, FL 33196**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**Voca
Cueto, Juana
7951 NW 197 street
Miami, FL 33015**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**Voca
Rodriguez, Manuel
14620 SW 143 tr
Miami, FL 33186**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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IN THIS SPACE**

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:

Elias Cueto, Pastor

4/25/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date