

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 22, 2003 8:00 am**  
**Secretary of State**

01-22-2003 90142 046 \*\*\*\*70.00

**DOCUMENT # N93000000109**

1. Entity Name  
**PENTECOSTAL MOVEMENT ESMIRNA OF HOLLYWOOD, INC.**



Principal Place of Business  
**6004-6 MIRAMAR PARKWAY  
HOLLYWOOD FL 33023**

Mailing Address  
**6004-6 MIRAMAR PARKWAY  
HOLLYWOOD FL 33023**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number **65-0380254**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**GUZMAN, NIDIA C  
7541 JUNIPER ST  
MIRAMAR FL 33023**

Name

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

City

**FL**

Zip Code

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

*Nidia Guzman* 1st Director

1/13/03

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>GUZMAN, NIDIA</b>	
STREET ADDRESS	<b>7541 JUNIPER ST</b>	
CITY-ST-ZIP	<b>MIRAMAR FL 33023</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>SALINAS, MARGARITA</b>	
STREET ADDRESS	<b>321 N 67TH AVE</b>	
CITY-ST-ZIP	<b>HOLLYWOOD FL 33023</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>QUINTANA, MIRIAM</b>	
STREET ADDRESS	<b>6731 JOHNSON STREET #110</b>	
CITY-ST-ZIP	<b>HOLLYWOOD FL 33024-0000</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>GUZMAN, JULIO</b>	
STREET ADDRESS	<b>7541 JUNIPER ST</b>	
CITY-ST-ZIP	<b>MIRAMAR FL 33023</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HERNANDEZ, NOELBA</b>	
STREET ADDRESS	<b>1501 NE MIAMI GARDENS DR. #343-C</b>	
CITY-ST-ZIP	<b>N. MIAMI BEACH FL 33179</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Nidia Guzman*

1/13/03 954-967-9381

CR2E037 (10/02)