

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90136 023 ****61.25

DOCUMENT # N93000004885

1. Corporation Name

IGLESIA BETESDA PENTECOSTAL, INC.

Principal Place of Business

327 EAST HALLANDALE BEACH BLVD
HALLANDALE FL 33009
US

Mailing Address

P O BOX 2171
HALLANDALE FL 33008
US



2. Principal Place of Business

21 1633 S. 21 ST AVE.

2a. Mailing Address

26 Suite, Apt. #, etc.

3. Date Incorporated or Qualified

11/01/1993

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

4. FEI Number
65-0456356

Applied For
Not Applicable

23 City & State

23 HOLLYWOOD, FLORIDA

28 City & State

28

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

24 Zip Country

24 33020 25 U.S.

29 Zip Country

29 30

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

GERENA, CHARLES
2735 PIERCE ST
#5B
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name GERENA, CHARLES
82 Street Address (P.O. Box Number is Not Acceptable)
400 N.E. 1 ST. STREET
83 #205
84 City HALLANDALE, FL 85 Zip Code 33009

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Charles Gerena PD 4-24-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GERENA, CHARLES PASTOR
STREET ADDRESS 327 EAST HALLANDALE BEACH BLVD
CITY-ST-ZIP HALLANDALE FL

TITLE D
NAME RUBIELA, GERENA M.
STREET ADDRESS 2735 PIERCE ST #5B
CITY-ST-ZIP HOLLYWOOD FL

TITLE DT
NAME GERENA, JOSEPHINE
STREET ADDRESS 101 SE 4TH AVE #4
CITY-ST-ZIP HALLANDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME GERENA, CHARLES PASTOR
1.3 STREET ADDRESS 400 NE 1 ST. STREET, #205
1.4 CITY-ST-ZIP HALLANDALE, FLORIDA, 33009

2.1 TITLE D
2.2 NAME RUBIELA, GERENA M.
2.3 STREET ADDRESS 400 NE 1 ST. STREET, #205
2.4 CITY-ST-ZIP HALLANDALE, FLORIDA, 33009

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles Gerena (CHARLES) GERENA, 4-24-99 454-454-6348
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)