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

Ur	HIFUKM BUSINE	35 KEPUKI	ַ עַט	DK)				
DOCU 1. Entity Nam IGLESIA P	005415 IC.	415		FILED 03 JUH - 5 PM 1:47				
Principal Place of Business 1764 W. FLAGLER STREET #1764 MIAMI FL 33135 US		Mailing Address 1764 W. FLAGLER STREET #1764 MIAMI FL 33135 US		NO WE) 	SECRE TALLAH	ASSEE. FLOR	: 47 NTE !DA
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 65-0443426 Applied For Not Applicate				
Zip Country		Zip Cor		ntry	5. Certificate of Status Desired		\$9.75 Additional	
	6. Name and Address of Current	Registered Agent			7 Name and Add	ress of New Registe		
o. Hallo and Addissa of Out on Hogisteria Agent				Name				
SANCHEZ	Z, JUAN INSON STREET		Street Address ((P.O. Box Number is Not Acceptable)			
	00D FL 33024	-						
				City	FL Zip Code			
SIGNATURE .	Signature, typed or printed name of registered agent	र कराँ		Agent signature required			DATE	
ı	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 DIF	RECTORS	11.		ADDITIONS/CHANGI	ES TO OFFICERS AN	ID DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COPT SANCHEZ, MARGARITA 7530 JOHNSON ST HOLLYWOOD FL 33024	□ Delete		ſ	06/05/	902053 3-0024-	□ Change 29678 000 **75	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NIEVES, ROMANA 621 NW 23RD CT APT #2 MIAMI FL	☐ Delete		ET ADDRESS ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SANCHEZ, JUAN 7530 JOHNSON ST HOLLYWOOD FL 33024	☐ Delete					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	PD SANCHEZ, MANUEL A 7530 JOHNSON STREET HOLLYWOOD FL 33024	☐ Delete					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP		10,000	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with	☐ Delete	NAME STREE CITY-	T ADDRESS ST-ZIP	10 57000 5		☐ Change	Addition

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: MARCHALLERYEONIADIEL SA NCHEZ 1-28-03 (9-4)789-630