

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000612

1. Entity Name

TEMPLO DEL ALTISIMO EL ELOHIM, INC.

Principal Place of Business

7617-19 DAVIE RD EXTENSION  
HOLLYWOOD FL 33032

Mailing Address

7617-19 DAVIE RD. EXTENSION  
HOLLYWOOD FL 33023

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

VAZQUEZ, RAFAEL  
7200 ALHAMBRA BLVD  
MIRAMAR FL 33024

7. Name and Address of New Registered Agent

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.

SIGNATURE

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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME VAZQUEZ, RAFAEL  
STREET ADDRESS 7200 ALHAMBRA BLVD  
CITY-ST-ZIP MIRAMAR FL 33023 ☐ Delete

TITLE VSD  
NAME VAZQUEZ, ESPERANZA  
STREET ADDRESS 7200 ALHAMBRA BLVD  
CITY-ST-ZIP MIRAMAR FL 33023 ☐ Delete

TITLE TD  
NAME CENDALES, BELINDA  
STREET ADDRESS 1415 3RD AVE APT#2  
CITY-ST-ZIP FT LAUDERDALE FL 33315 ☐ Delete

TITLE SD  
NAME VAZQUEZ, LUIS  
STREET ADDRESS 7623 DAVIE RD EXTENSION  
CITY-ST-ZIP HOLLYWOOD FL 33023 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME Vazquez, Rafael  
STREET ADDRESS 3417 Island Drive  
CITY-ST-ZIP Miramar, Fl 33023 ☒ Change ☐ Addition

TITLE V/P/SD  
NAME Vazquez, Esperanza  
STREET ADDRESS 3417 Island Drive  
CITY-ST-ZIP Miramar, Fl 33023 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TRD  
NAME Ismael Nieves  
STREET ADDRESS 17600 N.W. 68th Ave. #310  
CITY-ST-ZIP Hialeah, Fl. 33015 ☐ Change ☒ Addition

TITLE TRD  
NAME Oscar Vergel  
STREET ADDRESS 4460 S.W. 49th Ct.  
CITY-ST-ZIP Ft. Lauderdale, Fl. 33314 ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/2001

954-964-7801

FILED  
Mar 16, 2001 8:00 am  
Secretary of State

03-16-2001 90025 045 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

64-0469801

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

CR2E037 (10/00)