

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # N95000003926

1. Entity Name
IGLESIA PENTECOSTAL CANDELERO DE DIOS, INC.



Principal Place of Business
**1506 W. MICHIGAN ST.
ORLANDO, FL 32805 US**

Mailing Address
**1506 W. MICHIGAN ST.
ORLANDO, FL 32805 US**



01082007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ACEVEDO, JUAN JOSE
1506 WEST MICHIGAN ST.
ORLANDO, FL 32805**

**DO NOT WRITE
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Juan J. Acevedo* (D)

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/29/07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ACEVEDO, JUAN J
STREET ADDRESS 3908 RIO GRANDE AVE
CITY-ST-ZIP ORLANDO, FL 32839

TITLE D
NAME ACEVEDO, NOELIA
STREET ADDRESS 3908 RIO GRANDE AVE
CITY-ST-ZIP ORLANDO, FL 32839

TITLE SD
NAME MORALES, ROSITA
STREET ADDRESS 3908 RIO GRANDE AVE.
CITY-ST-ZIP ORLANDO, FL 32839

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/16/07-80052-002 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Juan J. Acevedo* Juan J. Acevedo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/07 (407) 316-8869