

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90202 039 \*\*\*\*61.25

**DOCUMENT # N96000001334**



1. Entity Name

IGREJA BATISTA RENOVADA DO CALVARIO, INC.

Principal Place of Business

3765 NE 18TH TERR  
POMPANO BEACH FL 33441  
US

Mailing Address

3765 NE 18TH TERR  
POMPANO BEACH FL 33441  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0649331

Applied For

Not Applicable

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

PIMENTA, EDSON  
1401 N E 41 CT  
POMPANO BEACH FL 33064

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE PD ☐ Delete  
NAME PIMENTA, EDSON  
STREET ADDRESS 3765 NE 18TH TERR  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE TD ☒ Delete  
NAME LOBO ROSA, RICARDO L  
STREET ADDRESS 3765 NE 18TH TERR  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE 2VD ☐ Delete  
NAME FRASAO, ADIR  
STREET ADDRESS 3616 HENRY AVE  
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE VD ☒ Delete  
NAME PINGNTA, SIRLENE  
STREET ADDRESS 1401 NE 41 CT  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE SD ☒ Delete  
NAME SIETH, ROBERTO V  
STREET ADDRESS 3000 NW STNTGR  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE TD ☐ Change ☒ Addition  
NAME FERREIRA DOUGLAS SILVA  
STREET ADDRESS 830 SE 1ST TERRACE  
CITY-ST-ZIP POMPANO BEACH FL 33060

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

TITLE VD ☐ Change ☒ Addition  
NAME PIMENTA, SIRLENE  
STREET ADDRESS 1401 NE 41 CT  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE SD ☐ Change ☒ Addition  
NAME ANDRADIE JOSUE R  
STREET ADDRESS 1150 CAMBRIDGE G.  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE 2SD ☐ Change ☒ Addition  
NAME MARELLINO GARCIA  
STREET ADDRESS 4421 NE 15 AV  
CITY-ST-ZIP POMPANO BEACH FL 33064

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Edson Pimenta*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Phone #