

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

FILED
Jul 28, 2003 8:00 am
Secretary of State

07-28-2003 90151 025 ****70.00

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1. Entity Name

IGLESIA PRINCIPE DE PAZ LA SENDA ANTIGUA, INC.



Principal Place of Business

**3206 NW 2ND AVE
MIAMI FL 33127**

Mailing Address

**3206 NW 2ND AVE
MIAMI FL 33127**

2. Principal Place of Business

Iglesia-Principe De Paz

Suite, Apt. #, etc. **3206 N.W.**

La Senda Antigua 2 AVE

City & State **Miami**

Zip **FL 33127**

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0804821**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VEGA, ANTONIA
1310 N.W. 132ND TERRACE
MIAMI FL 33187**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Antonia S. Vega**

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	VEGA, ANTONIA	
STREET ADDRESS	440 E. 23 ST.	
CITY-ST-ZIP	HIALEAH FL 33013	
TITLE	ST	☐ Delete
NAME	PEREZ, EULOGIA S	
STREET ADDRESS	2375 NW 31ST STREET	
CITY-ST-ZIP	MIAMI FL 33142	
TITLE	D	☐ Delete
NAME	AROCH, PABLO DE JESUS	
STREET ADDRESS	10011 NW 26TH AVE	
CITY-ST-ZIP	MIAMI FL 33147	
TITLE	D	☐ Delete
NAME	AROCH, OLGA LIDIA	
STREET ADDRESS	10011 NW 26TH AVE	
CITY-ST-ZIP	MIAMI FL 33147	
TITLE	D	☐ Delete
NAME	CABRERA, OCTAVIO DE JES	
STREET ADDRESS	1842 NW 35TH STREET	
CITY-ST-ZIP	MIAMI FL 33142	
TITLE	D	☐ Delete
NAME	CABRERA, DORA ALICIA	
STREET ADDRESS	1842 NW 35TH STREET	
CITY-ST-ZIP	MIAMI FL 33142	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 219.07(3)(b), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)