

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

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DOCUMENT # N98000002865

1. Entity Name

IGLESIA DE DIOS MINISTERIAL DE JESUCRISTO INTERNACIONAL, INC.

02-04-2002 90109 039 ****70.00

Principal Place of Business

Mailing Address

11996 GLENMORE DRIVE
 CORAL SPRINGS FL 33071

11996 GLENMORE DRIVE
 CORAL SPRINGS FL 33071

2. Principal Place of Business

3. Mailing Address

10550 NW 77th Court

Suite, Apt. #, etc.
 224

City & State
 Hialeah Gardens, FL

Zip
 33016

Country
 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0839302

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

NUNEZ, ANGEL ESQ.
 11996 GLENMORE DRIVE
 CORAL SPRINGS FL 33071

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: DOS
 NAME: DEMORENO, MARIA LUISA Delete
 STREET ADDRESS: 2450 W 58TH STREET
 CITY-ST-ZIP: HIALEAH FL 33016

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

TITLE: DOT
 NAME: ECHEVERRI-LOPEZ, OLGA Delete
 STREET ADDRESS: 2450 W 58TH STREET
 CITY-ST-ZIP: HIALEAH FL 33016

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

TITLE: DOS
 NAME: NUNEZ, ANGEL Delete
 STREET ADDRESS: 11996 GLENMORE DRIVE
 CITY-ST-ZIP: CORAL SPRINGS FL 33071

TITLE: Change Addition
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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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/2002 305-558-7200
 Date Daytime Phone #

CR2E037 (9/01)