

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003469

1. Entity Name

IGLESIA CRISTIANA CANDELERO DE ORO, INC.

**FILED**  
May 02, 2000 8:00 am  
Secretary of State

05-02-2000 90064 033 \*\*\*\*61.25

Principal Place of Business

Mailing Address

~~406 S ORLANDO AVE~~  
MAITLAND FL 32857-4103

~~801 HUNTINGTON PLACE~~  
ORLANDO FL 32803-6617

2. Principal Place of Business

3. Mailing Address

4451 OLD WINTER GARDEN RD  
Suite, Apt. #, etc.

PO BOX 574103  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

City & State

Orlando FL

4. FEI Number

59-3514700

Applied For

Not Applicable

Zip

32808

Country

Orange

Zip

32857-4103

Country

Orange

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

~~BORRERO, ELISEO~~  
~~801 HUNTINGTON PLACE~~  
~~ORLANDO FL 32803~~

Name Jose R. Rodriguez

Street Address (P.O. Box Number is Not Acceptable)

11 Silver Swan CT

City Kissimmee

FL

Zip Code  
34743-3811

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 Jose R. Rodriguez

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

(NOTE: Registered Agent signature required when reinstating)

4/21/2000

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 DIR ☒ Delete  
NAME BORRERO, ELISEO  
STREET ADDRESS 801 HUNTINGTON PL  
CITY-ST-ZIP ORLANDO FL 32807

TITLE DIR ☒ Change ☐ Addition  
NAME JOSE R. RODRIGUEZ  
STREET ADDRESS 11 SILVER SWAN CT  
CITY-ST-ZIP KISSIMMEE FL 34743-3811

TITLE DIR ☐ Delete  
NAME TIRADO, RITA  
STREET ADDRESS 5500 ROUND LAKE DR  
CITY-ST-ZIP APOPKA FL 32712

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

TITLE DIR ☒ Delete  
NAME FIGUEROA, RAFAEL  
STREET ADDRESS 9309 SPRINGVALE DR  
CITY-ST-ZIP ORLANDO FL 32718

TITLE DIR ☒ Change ☐ Addition  
NAME RUBEN RODRIGUEZ  
STREET ADDRESS 6159 ROXBURG AVE  
CITY-ST-ZIP ORLANDO, FL 32809

TITLE DIR ☐ Delete  
NAME NIEVES, INES  
STREET ADDRESS 1542 SILVERSMITH PL  
CITY-ST-ZIP ORLANDO FL 32818

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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 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: Jose R. Rodriguez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00 (407) 348-6183

Date

Daytime Phone #