

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90044 019 *****61.25

DOCUMENT # N98000003469

1. Entity Name

IGLESIA CRISTIANA CANDELERO DE ORO, INC.

Principal Place of Business

**4451 OLD WINTER GARDEN RD
 ORLANDO FL 32808**

Mailing Address

**PO BOX 574103
 ORLANDO FL 32857-4103**

2. Principal Place of Business

3. Mailing Address

PO Box 680040

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ORLANDO FL

4. FEI Number

59-3514700

Applied For

Not Applicable

Zip

Country

Zip

Country

32868-0040

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

**RODRIGUEZ, JOSE R
 11 SILVER SWAN CT
 KISSIMMEE FL 34743**

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 ☐ Delete
 NAME **DIR**
 STREET ADDRESS **RODRIGUEZ, JOSE R**
 CITY-ST-ZIP **11 SILVER SWAN CT
 KISSIMMEE FL 34743-3811**

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

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

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

TITLE ☒ Delete
 NAME **DIR**
 STREET ADDRESS **RODRIGUEZ, RUBEN**
 CITY-ST-ZIP **6159 ROXBURG AVE
 ORLANDO FL 32809**

TITLE ☒ Change ☐ Addition
 NAME **DIR**
 STREET ADDRESS **JOSE A SERRANO**
 CITY-ST-ZIP **1117 SUMMER LAKES DR
 ORLANDO, FL 32835**

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

4/23/01

407-348-6183

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)