

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006609

1. Entity Name

MINISTERIOS JUAN 3:16 DIOS AMA A LAS NACIONES, I

FILED
Aug 01, 2000 8:00 am
Secretary of State

08-01-2000 90004 021 ****70.00

Principal Place of Business

Mailing Address

1302 MOSELLE AVE.
ORLANDO FL 32807

1302 MOSELLE AVE.
ORLANDO FL 32807-2010

2. Principal Place of Business

7006-Suite A
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 570263
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Winter Park, FL

City & State
Orlando, FL

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

Zip
32792

Country
Orange

Zip
32857-0263

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

HERNANDEZ, OSVALDO
1302 MOSELLE AVE.
ORLANDO FL 32807

Name

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

2807 United Kingdom Cir.

City
Winter Park

FL

Zip Code
32792

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HERNANDEZ, OSVALDO
1302 MOSELLE AVE.
ORLANDO FL 32807 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2807 United Kingdom Cir
Winter Park, FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HERNANDEZ, ROSA E
1302 MOSELLE AVE.
ORLANDO FL 32807 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2807 United Kingdom Cir.
Winter Park, FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CANCEL, AMERICA
7361 MOSS GROVE COURT
ORLANDO FL 32807 ☒ Delete

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

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CITY-ST-ZIP
☐ Change ☐ Addition

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

7/25/00

Date

(407) 673-3791

Daytime Phone #