	BINOT-FOR-PRO	SS REPOR	RATION T (UBR)	"\ /	FILED y 05, 2003 8: ecretary of St 05-05-2003 91843 043 ****	
. Entity Name	P-GOD, FIRE ON THE ALTAI	TINC:	211		JS-US-2UU3 91843 U43 ****(o9.00
HINRA H	OF GOD Proclaim	ing Liberation	N. The	Χ		
Principal Place		Mailing Address		-		
1-O GASTON FOSTER RD 431-O GASTON		431-O GASTON FOSTER I	RD			
JITE D Rlando Fl 32	907 -	ORLANDO FL 32807			. I MARIA MARIA MARIA ANA ANG ANG ANA ANG ANG ANG ANG ANG AN	
Principal Pla	GASTON FOSTER Rd	3. Mailing Address <u>431- 0 645</u> Suite, Apt. #, etc.	ton Fostere Ra	2	HECK HERE IF MAKING CHANGES	
0		Stel O				
City & State OR I Ando FL		City & State ORIANDO, FL		Not Applicable		
Zip Country		Zip	Zip Country		5. Certificate of Status Desired 58.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			OFANGE	7. Name and Address of New Registered Agent		
Name (L			lestrin, JUEHE			
CELESTRIN, IVETTE Celestrin 1446 D. W. HOLDEN AVE			Street Addre	adress (P.O. Box Number is Not Acceptable)		
ORLANDO						
			CITYRIA	mda	FL Zip Co	
	ons of registered agent <u>huette</u> <u>eleste</u> Signature, typed or printed name of registered agent ar	d title if applicable. (NO	DTE: Registered Agent signature rec	uired when reinstating)	4-23-0 DATE	23
	ILE NOW: FEE IS \$61.25		ampaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Payable Florida Department of	
0.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	
	PDSP Celestrin, Hilario	Delete	TITLE NAME		🗌 Change	Addition
	1446-D W. HOLDEN AVENUE		STREET ADDRESS			
	ORLANDO FL 32839		CITY-ST-ZIP		[]] Change	Addition
	TD PINERO, ISMAEL	Delete	TITLE NAME			_
TREET ADDRESS	1108 RED MAN STREET		STREET ADDRESS			
ITY_ST-ZIP	ORLANDO FL 32809	Delete	TITLE		Change	e 🔲 Addition
itle Name	CELESTRIN, IVETTE		NAME			
STREET ADDRESS	1446-D W. HOLDEN AVENUE		STREET ADDRESS CITY - ST - ZIP			
CITY-ST-ZIP	ORLANDO FL 32839	Delete	TITLE		Change	e 🗌 Addition
IAME	REID, CYNTHIA					
TREET ADDRESS	1108 REDMAN ST		STREET ADDRESS CITY-ST-ZIP			
ITLE	ORLANDO FL 32809	Delete	τιτιε	<u> </u>	Chang	e 🗌 Addition
IAME						
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP			
TITLE	<u> </u>	Delete	TITLE		Chang	e 🔲 Addition
NAME			NAME STREET ADDRESS			
STREET ADDRESS CITY - ST - ZIP			CITY-ST-ZIP			
12. I hereby (indicated	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emport , or on an attachment with an address,	wered to execute this rep	ort as required by Chapte ed.	in Section 119.07(3)(i), Fl e the same legal effect as in 617, Florida Statutes; an	d that my name appears in Block 10	e information cer or director or Block 11 if