

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED

Jun 06, 2000 8:00 am
Secretary of State

05-15-2000 90313 006 ****61.25

DOCUMENT # P N99000002016

1. Entity Name Ministerio Internacional "Puerta de Salvación"
DBA University of Divine Consciousness Studies

Principal Place of Business 900 W 49 St. Suite #502
Hialeah, FL 33012

2. Principal Place of Business 900 W. 49 St.
Suite, Apt. #, etc. Suite # 502
City & State Hialeah
Zip FL **Country** 33012

3. Mailing Address 900 W 49 St.
Suite, Apt. #, etc. Suite # 502
City & State Hialeah
Zip FL **Country** 33012

4. FEI Number EIN # 65-0908008

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Verena Price
15331 Turnbull Dr.
Miami Lakes, FL 33014

7. Name and Address of New Registered Agent
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 Verena Price Verena Price, Secretary 4/27/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE

FILE NOW
FEE IS \$61.25

9. Election Campaign Financing ☐ **\$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 <u>President</u> ☐ Delete	NAME <u>Guillermo Alvarez</u>	TITLE <u>S - D</u> ☒ Change ☐ Addition	
STREET ADDRESS <u>431 NW 56 Av.</u>	CITY - ST - ZIP <u>Miami, FL 33126</u>	NAME <u>Peter Sieber</u> ☐ Change ☒ Addition	
TITLE <u>Vice-President</u> ☐ Delete	NAME <u>Estela Avila</u>	STREET ADDRESS <u>11833 SW 16 St. Bldg #129</u>	
STREET ADDRESS <u>1800 W 63rd St.</u>	CITY - ST - ZIP <u>Hialeah, FL 33012</u>	CITY - ST - ZIP <u>Pembroke Pines, FL 33025</u>	
TITLE <u>Secretary</u> ☐ Delete	NAME <u>Verena Price</u>	TITLE <u>Navarro, Abelardo</u> ☐ Change ☒ Addition	
STREET ADDRESS <u>15331 Turnbull Dr.</u>	CITY - ST - ZIP <u>Miami Lakes, FL 33014</u>	STREET ADDRESS <u>905 SW 1st St., Apt. #102</u>	
TITLE <u>Treasurer</u> ☐ Delete	NAME <u>Maria J. Gonzalez</u>	CITY - ST - ZIP <u>Miami, FL 33130</u>	
STREET ADDRESS <u>845 W 75 St. #310</u>	CITY - ST - ZIP <u>Hialeah, FL 33014</u>	☐ Change ☐ Addition	
TITLE ☐ Delete	NAME	☐ Change ☐ Addition	
STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE ☐ Delete	NAME	☐ Change ☐ Addition	
STREET ADDRESS	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: Verena Price Verena Price (305) 512-3811
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #