

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90049 032 *****70.00

DOCUMENT # N99000003290			
1. Entity Name IGLESIA PENTECOSTAL ROCA DE SALVACION, ALPHA & OMEGA, INC.			
Principal Place of Business 290 MARION OAKS BOULEVARD OCALA FL 34473		Mailing Address 290 MARION OAKS BLVD OCALA FL 34473	
2. Principal Place of Business 290 MARION OAKS BLVD		3. Mailing Address 290 MARION OAKS BLVD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State OCALA FL		City & State OCALA FL	
Zip 34473	Country MARION	Zip 34473	Country MARION
5. Name and Address of Current Registered Agent COLON, CARLOS J 11 PINE CIRCLE RUN OCALA FL 34472		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	



MOORE CR2E037 (11/03)

4. FEI Number **65-0923613** Applied For
Not Applicable

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Carlos J. Colon* Director *Carlos J. Colon - Director* 3/24/04
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
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COLON, CARLOS J 11 PINE CIRCLE RUN OCALA FL 34472 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Colon, Carlos J. 11 PINE CIRCLE RUN OCALA FL 34472 ☐ Change ☒ Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST TORRES, ROSA M 14960 SW 25 CIR. OCALA FL 34473 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Generoso Nieves 14699 SW 41st Rd OCALA FL 34473 ☐ Change ☒ Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Rosa M. Torres 1496 SW 25 Circle OCALA FL 34473 ☐ Change ☒ Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VOCA Noemi Concepcion 16811 SW 47th CT Rd OCALA FL 34473 ☐ Change ☒ Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addit

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 changed, or on an attachment with an address, with another like empowered.

SIGNATURE: *Carlos J. Colon* Director *Carlos J. Colon - Director* 3/24/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Time Phone #