FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 17, 2001 8:00 am DOCUMENT # **N99000005225 Secretary of State** 1. Entity Name 04-23-2001 90206 016 ****75.00 CASA DE DIOS AMOR Y PAZ CORP. Principal Place of Business Mailing Address 3525 68TH PL 1036 24TH PLACE S.W. VERO BEACH FL 32967 VERO BEACH FL 32962 2. Principal Place of Business Mailing Address Same Some Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) OROZCO, ZORAIDA REV. 1036 24TH PLACE S.W. VERO BEACH FL 32962 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 \$5.00 May Be Make Check Payable to After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE (5/01) ☐ Delete TITLE Addition OROZCO, ZORAIDA REV. NAME STREET ADDRESS 1036 24TH PLACE S.W. CR2E037 STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32962 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SANTIAGO, LUZ DEL SOL NAME NAME STREET ADDRESS 660 19TH ST. S.W. STREET ADDRESS CITY-ST-ZIP+ VERO BEACH FL 32962 CITY:ST:ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FIGUEROA, ANTONIA NAME STREET ADDRESS 938 BEACH LANE STREET ADDRESS CITY-ST-ZIP SEBASTIAN FL 32958 CITY-ST-ZIP TITLE TD Delete TITLE Change ☐ Addition NAME GONZALEZ, CONCEPCION NAME STREET ADDRESS 408 7TH RD. S.W. STREET ADDRESS CITY-ST-ZIP vero Beach Fl 32962 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.