

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90441 041 ****75.00

DOCUMENT # N99000005225

1. Entity Name
CASA DE DIOS AMOR Y PAZ CORP.



Principal Place of Business

**3525 68TH PL
VERO BEACH FL 32971**

Mailing Address

**1036 24TH PLACE S.W.
VERO BEACH FL 32962**

2. Principal Place of Business

186 27th Avenue

3. Mailing Address

2746 1st PL.

Suite, Apt. #, etc.

Vero Beach Fla

Suite, Apt. #, etc.

Vero Beach Fla

City & State

City & State

Zip

32962

Country

Indian River

Zip

32968

Country

Indian River

6. Name and Address of Current Registered Agent

**OROZCO, ZORAIDA REV.
1036 24TH PLACE S.W.
VERO BEACH FL 32962**

4. FEI Number **65-0979907**

Applied For

Not Applicable

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

7. Name and Address of New Registered Agent

Name

Same

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	OROZCO, ZORAIDA REV.	
STREET ADDRESS	1036 24TH PLACE S.W.	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SANTIAGO, LUZ DEL SOL	
STREET ADDRESS	660 19TH ST. S.W.	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	FIGUEROA, ANTONIA	
STREET ADDRESS	938 BEACH LANE	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	TD	<input type="checkbox"/> Delete
NAME	RIOS, ELIZABETH	
STREET ADDRESS	625 24TH PL SW	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rosa Aranda	
STREET ADDRESS	3027 7th SW	
CITY-ST-ZIP	Vero Beach Fla 32962	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (10/02)

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: **ZORAIDA OROZCO** 2-6-03 (772) 778-3457