

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769405

Entity Name: UNITED PENTECOSTAL CHURCH INC.**Current Principal Place of Business:**2104 NW 152ND TERRACE
OPA LOCKA, FL 33054**Current Mailing Address:**1331 NE 211 ST
MIAMI FL , FL 33179 US**FEI Number: 59-2469307****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HARRIS, CHARLENE
1331 NE 211 ST
MIAMI FLORIDA, FL 33179 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

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| Title | PD |
| Name | HARRIS, CHARLENE |
| Address | 1331 NE 211 ST |
| City-State-Zip: | MIAMI FL 33179 |

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| Title | D |
| Name | FRANCOIS, VILIA |
| Address | 580 JANN AVE |
| City-State-Zip: | OPA LOCKA FL 33054 |

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| Title | SECRETARY |
| Name | QUINN, DEYAUNA Q |
| Address | 1331 NE 211 ST |
| City-State-Zip: | MIAMI FL 33179 |

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|-----------------|-----------------------|
| Title | DEACON |
| Name | JEKINS, WILLIE |
| Address | 2966 NW 132 ST 511 |
| City-State-Zip: | OPA LOCKA FL 33054 |

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|-----------------|------------------------|
| Title | DEACONESS |
| Name | WILLIAMS, BRUCELIA |
| Address | 2966 NW 132 ST #511 |
| City-State-Zip: | OPA LOCKA FL 33054 |

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|-----------------|--------------------------|
| Title | PASTOR |
| Name | CROMER, SHARTONYA SELENE |
| Address | 1331 NE 211 ST |
| City-State-Zip: | MIAMI FL 33179 |

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|-----------------|----------------------|
| Title | C |
| Name | FARMER, BEVERLY |
| Address | 7001 NW 15 AVE #6 |
| City-State-Zip: | MIAMI FL 33147 |

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|-----------------|--|
| Title | OFFICER |
| Name | CROMER, ANTHONY GEROME |
| Address | 2104 NW 152 TERR, OPA- LOCKA FL, 33054 OPA, LOCKA FL 33054 |
| City-State-Zip: | OPA LOCKA FL 33054 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHARTONYA CROMER**PASTOR****02/09/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date