## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007604

FILED Apr 06, 2010 Secretary of State

Entity Name: CENTRO BIBLICO PUERTAS DE SION INC.

Current Principal Place of Business: New Principal Place of Business:

4450 NW 135 STREET 16131 NW 57 AVE MIAMI, FL 33054 MIAMI, FL 33014

Current Mailing Address: New Mailing Address:

P.O. BOX 5433 HIALEAH, FL 33014

FEI Number: 03-0450613 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 MARTINEZ, ANDRES DR
 MARTINEZ, ANDRES DR

 4450 NW 135 STREET
 16131 NW 57 AVE

 OPA- LOCKA, FL 33054
 US

 MIAMI, FL 33014
 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: 04/06/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: I

 Name:
 MARTINEZ, ANDRES

 Address:
 16131 NW 57 AVE

 City-St-Zip:
 MIAMI, FL 33014

Title: VP

 Name:
 MARTINEZ, BETSAIDA

 Address:
 16131 NW 57 AVE

 City-St-Zip:
 MIAMI, FL 33014

Title: STD

 Name:
 PARDO, KARLA

 Address:
 16131 NW 57 AVE

 City-St-Zip:
 MIAMI, FL 33014

Title:

Name: RODRIGUEZ, ANA
Address: 16131 NW 57 AVE
City-St-Zip: MIAMI, FL 33014

Title:

 Name:
 LOPEZ, INGRIS

 Address:
 16131 NW 57 AVE

 City-St-Zip:
 MIAMI, FL 33014

Title: [

 Name:
 SERRANO, JAIRO

 Address:
 16131 NW 57 AVE

 City-St-Zip:
 MIAMI, FL 33014

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: BETSAIDA MARTINEZ VP 04/06/2010