

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006093

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: IGLESIA EVANGELICA EBEN-EZER CAM, INC.

**Current Principal Place of Business:**

6210B SOUTH DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405 US

**New Principal Place of Business:**

**Current Mailing Address:**

6210B SOUTH DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405 US

**New Mailing Address:**

FEI Number: 26-0518263      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

VIAJESERVI USA  
2905 NW 9 ST  
MIAMI, FL 33125 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PEREZ DE LEON, FILEMON M  
Address: 1409 WARREN ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: VP  
Name: DE LEON-SANCHEZ, DAVID  
Address: 3812 DAWES AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: S  
Name: PEREZ DE LEON, WILSON F  
Address: 1409 WARREN ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: T  
Name: GARCIA, JULIO C  
Address: 1413 HAMPTON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: DIR  
Name: DE LEON DE PEREZ, EMMA R  
Address: 1409 WARREN ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

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: FILEMON PEREZ

PD

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date