2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT #713885

IGLESIA EVANGELICA INTERNACIONAL SOLDADOS DE LA CRUZ DE CRISTO, INC.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business

641 W FLAGLER ST MIAMI, FL 33130

Mailing Address

641 W FLAGLER ST MIAMI, FL 33130



01312007 No Chg-NP

CR2E037 (4/06)

Applied For 4. FEI Number NOT APPLICABLE Not Applicable **\$8.75** Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

WINGFIELD, MAGDIEL 655 SW 1ST STREET MIAMI, FL 33130

of the corporation or the receiver of truspe emp changed, or on an attachment with an address.

SIGNATURE:

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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. If am familiar with, and accept the obligations of registered agent.					
SIGNATURE	Signature, typed or printed hame of registered agent and title	att applicable (NOTE Registered	Agent signature	required when rainstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARCIA, CECILIO 655 S.W. 1 ST. MIAMI, FL 33120				
TITLE NAME STREET ADDRESS CITY-S1-ZIP	VD MONDEJAR, JOEL 655 SW 1ST STREET MIAMI, FL 33128				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, MIGUEL 628 NW 1ST STREET MIAMI, FL 33128			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S QUEZADA, EVELYN 628 NW 1ST STREET MIAMI, FL 33128			IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VT MENDIONDO, OMAR 6415 NORTHWEST 201 STREET HIALEAH, FL 33015	•			ľ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS NOVOA, VERONIKA 655 S.W. 1 ST. MIAMI, FL. 33130				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 a 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

SIGNING OFFICER OR DIRECTOR

with all other like empowered.