2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003301

FILED May 15, 2008 Secretary of State

Entity Name: ASOCIACION DE MINISTROS E IGLESIAS DE BROWARD (AMIB), INC.

	Current Principal Place of Business:			New Principal Place of Business:	
	ROSPECT RD. ERDALE, FL 33309	US			
Current M	lailing Address:		New Maili	ng Address:	
	ROSPECT RD. ERDALE, FL 33309	US			
n accordan		S., the corporation did not receive			
DIAZ, ANC 3000 W. P		US		, , , , , , , , , , , , , , , , , , ,	
	e named entity submits e of Florida.	this statement for the purpose	of changing	its registered office or registered agent, or both,	
SIGNATUI					
	Electronic Sign	ature of Registered Agent		Date	
FFICER	S AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Nddress:	P (X) Delete DIAZ, OSWALDO J 14040 RIDGE WOOD L	AKE	Title: Name: Address:	() Change () Addition	
	DAVIE, FL 33325 US		City-St-Zip:		
City-St-Zip: Title: Name: Address:	VP () Delete CALLEJAS, GABRIEL 6010 WOODLAND POIN TAMARAC, FL 33319	IT DR.	City-St-Zip: Title: Name: Address: City-St-Zip:	()Change ()Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	VP () Delete CALLEJAS, GABRIEL 6010 WOODLAND POIN		Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Jame: Jame:	VP () Delete CALLEJAS, GABRIEL 6010 WOODLAND POIN TAMARAC, FL 33319 T () Delete CALLES, RICARDO 3050 LA MIRAGE DR.) CLE N	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:		
City-St-Zip: Title: Jame: Jame:	VP () Delete CALLEJAS, GABRIEL 6010 WOODLAND POIN TAMARAC, FL 33319 T () Delete CALLES, RICARDO 3050 LA MIRAGE DR. LAUDERHILL, FL 3331: S () Delete VILLAMIZAR, RUTH 4069 CARAMBOLA CIRC	9 CLE N 33066 US	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change () Addition P (X) Change () Addition VILLAMIZAR, RUTH 4069 CARAMBOLA CIRCLE N	

Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICARDO CALLES T 05/15/2008