2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712651

FILED Feb 26, 2005 Secretary of State

Entity Name: MIAMI LATIN CHURCH OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business: 7712 E CHELSEA STREET TAMPA, FL 33610 **Current Mailing Address: New Mailing Address:** PO BOX 11735 TAMPA, FL 336801735 US FEI Number: 59-0766968 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: PEREZ-SANCHEZEZ, MANUEL 27509 BREAKERS DR WESLEY CHAPEL, FL 33543 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LABRA, CARLOS Name: Name: 5838 COLLINS AVENUE, #5C Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip: Title: Title: () Delete () Change () Addition PEREZ-SANCHEZ, MANUEL Name: Name: Address: 27509 BREAKERS DR. Address: City-St-Zip: WESLEY CHAPEL, FL 33543 US City-St-Zip: Title: () Delete Title: () Change () Addition BETANCOURT, CARLOS J Name: Name: Address: 713 N Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: Title: ΜT () Delete Title: () Change () Addition Name: COLON, NELSON F Name: 1438 ROYAL ST GEORGE DR Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: () Delete Title: () Change () Addition RUIZ, RAFAEL Name: Name: 501 WATERSKAPE WAY Address: Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip: Title: () Delete Title: () Change () Addition UREÑA, EDUARDO Name: Name: Address: 2440 SE SAPELO AVE Address: PT ST LUCIE, FL 34952 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANUEL PEREZ SANCHEZ PD 02/26/2005