

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720957

FILED
Apr 22, 2005
Secretary of State

Entity Name: SPANISH BETHANY MISSION, INC. (ASSEMBLIES OF GOD) OF MIAMI BEACH, FLORIDA

Current Principal Place of Business:

1228 NORMANDY DRIVE
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

8942 HAWTHORNE AVE
SURFSIDE, FL 33154 US

New Mailing Address:

FEI Number: 05-0191708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, ANDRES B
8942 HAWTHORNE AVENUE
SURFSIDE, FL 33154 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: VPD () Delete
Name: VILASECA, NELLY
Address: 733 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33154

Title: PD () Delete
Name: ROMAN, ANDRES B,
Address: 8942 HAWTHORNE AVENUE
City-St-Zip: SURFSIDE, FL

Title: T () Delete
Name: AZOR, PABLO
Address: 2801 NE 183RD ST. # 712
City-St-Zip: AVENTURA, FL 33160

Title: S () Delete
Name: AMPIE, ELISED
Address: 12536 NW 11TH TRAIL #110
City-St-Zip: MIAMI, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: REV. ANDRES ROMAN

PD

04/22/2005

Electronic Signature of Signing Officer or Director

Date