2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720957

FILED Apr 23, 2009 Secretary of State

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

Current Principal Place of Business:			New Principal Place of Business:	
	MANDY DRI' ACH, FL 331			
Current Mailing Address:			New Mailing Address:	
3629 W 11 HIALEAH,		US		
FEI Number:	61-1574945	FEI Number Applied For () FEI Nu	umber Not Applicable ()	Certificate of Status Desired (X)
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
TABARES, 3629 W 11 HIALEAH,	AVE	US		
	named entity of Florida.	submits this statement for the purpose	of changing its registere	ed office or registered agent, or both,
SIGNATUF	RE:			
	Electro	onic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPD (TABARES, M 3629 W 11 / HIALEAH, FL	\VE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PD (TABARES, RU 3629 W 11 / HIALEAH, FL	\VE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	FIGUEROA, E 1757 NORMA		Title: Name: Address: City-St-Zip:	() Change () Addition
City-St-Zip:	IVIII IIVII DEI (OI			
City-St-Zip: Title: Name: Address: City-St-Zip:		G AVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	S (VILLASECA, 1733 HARDIN MIAMI BEACO (ROMAN, MAR	NELLIE H G AVE H, FL 33154) Delete JORIE ORNE AVENUE	Name: Address:	() Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RUBEN TABARES MR. 04/23/2009