2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 22, 2005
Secretary of State

DOCUMENT# 725394

Entity Name: IGLESIA BETANIA ASAMBLEAS DE DIOS DE MIAMI INC.

Current Principal Place of Business:

10300 N.W. 36TH PL
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 126217
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 65-0371845 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAMOS, SERGIO
10300 NW 36 PLACE
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

ACOSTA, BORIS
10300 NW 36 PLACE
MIAMI, FL 33147 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: BORIS ACOSTA 11/22/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RAMOS, SERGIO A
Address: 10321 NW 36 PL
City-St-Zip: MIAMI, FL 33147

Title: SD ( ) Delete
Name: CASTILLO, CESAR
Address: 6485 W 24 AVE APT # 504
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: TD ( ) Delete
Name: ROSARIO, PEDRO
Address: 16850 S GLADES DR APT # 53
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: CRUZ, CLOTILDE
Address: 1250 NE 206 ST
City-St-Zip: NORTH MIAMI, FL 33179

Title: D ( ) Delete
Name: CASTILLO, ANTONIO
Address: 1555 NE 180TH ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ACOSTA, BORIS
Address: 10321 NW 36 PL
City-St-Zip: MIAMI, FL 33147

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: BORIS ACOSTA PD 11/22/2005
Electronic Signature of Signing Officer or Director Date