2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725394

FILED Feb 13, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

P.O. BOX 126217

HIALEAH, FL 33012 US

FEI Number: 65-0371845 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:

GARCIA, RUBEN 10300 N.W. 36TH PL 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:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Chan

 Name:
 GARCIA, RUBEN
 Name:
 GARCIA, RUBEN

 Address:
 10300 NW 36 PL
 Address:
 10300 NW 36 PL

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 MIAMI, FL 33147 US

Title: TD () Delete Title: T (X) Change () Addition Name: CRUZ, CLOTILDE Name: ROLDAN, ALEXANDER

 Name:
 CRUZ, CLOTILDE
 Name:
 ROLDAN, ALEXANDER

 Address:
 1250 NE 206 ST
 Address:
 1172 NE 160TH. STREET

City-St-Zip: NORTH MIAMI, FL 33179 City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

 Name:
 ROLDAN, ALEXANDER
 Name:
 CARDONA, OLIVIA

 Address:
 1172 NE 160TH. STREET
 Address:
 1275 NW 122ND. ST.

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 City-St-Zip:
 NORTH MIAMI, FL 33167 US

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: GARCIA, RUBEN PD 02/13/2008