2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 17, 2009
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 ( )**

Name and Address of Current Registered Agent:

GARCIA, RUBEN
10300 N.W. 36TH PL
MIAMI, FL 33147 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: PD ( ) Delete
Name: GARCIA, RUBEN
Address: 10300 NW 36 PL
City-St-Zip: MIAMI, FL 33147 US

Title: T ( ) Delete
Name: CASTILLO, NOERIS J
Address: 1705 WEST 42ND. ST. APT. 202
City-St-Zip: HIALEAH, FL 33012 US

Title: S ( ) Delete
Name: CARDONA, OLIVIA
Address: 1275 NW 122ND. ST.
City-St-Zip: NORTH MIAMI, FL 33167 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: GARCIA, DORKA
Address: 442 EAST 18 ST
City-St-Zip: HAILEAH, FL 33013 US

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

Title: T ( ) Change (X) Addition
Name: FERNANDEZ, ALEXEI
Address: 3603 NW 106 ST
City-St-Zip: MIAMI, FL 33147 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: RUBEN GARCIA PD 07/17/2009

Electronic Signature of Signing Officer or Director — Date