

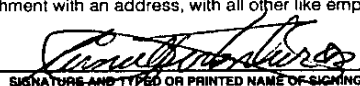


2005 NOT-FOR-PROFIT CORPORATION - AMENDED ANNUAL REPORT

Amended

05 JUN 30 AM 8:23

DOCUMENT # 731439 1. Entity Name EVANGELICAL SPANISH AMERICAN CHURCH OF HIALEAH, INC.					
Principal Place of Business 1325 W. 30 ST HIALEAH, FL 33012-4853 US			Mailing Address 4929 E. 8TH COURT HIALEAH, FL 33013 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 4569 SW 2nd Terrace Suite, Apt. #, etc.			
City & State Zip Country		City & State Miami, FL 33134 Zip Country		4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RODRIGUEZ, ENRIQUE 6900 NW 169 ST UNIT H MIAMI, FL 33015			7. Name and Address of New Registered Agent Name Arnulfo Ventura Street Address (P.O. Box Number is Not Acceptable) 4569 SW 2nd Terrace City Miami FL Zip Code 33134		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		ARNULFO VENTURA		6/29/05	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FERNANDEZ, ALEJANDRO 6900 NW 169 ST UNIT H MIAMI, FL 33015	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Fernandez, Alejandro 6900 NW 169 Street, Unit H Miami, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODRIGUEZ, ENRIQUE 2693 W 70 PL HIALEAH, FL 33016	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	900057339459 07/12/05--01017--001 **70.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENTURA, ARNULFO 4569 SW 2ND TERR MIAMI, FL 33134	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/President/Treasurer Ventura, Arnulfo 4569 SW 2nd Terrace Miami, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Secretary Quesada, Arnaldo 4929 E. 8th Court Hialeah, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Arnulfo Ventura		6/29/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	