2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# 732926

Entity Name: PRIMERA IGLESIA BAUTISTA HISPANA, INC.

Current Principal Place of Business:

1790 NE 2ND CT.
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1790 NE 2ND CT.
MIAMI, FL 33132

New Mailing Address:

FEI Number: 59-2370025 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALCEDO, RUGERO
864 W 72 PL
HIALEAH, FL 33014 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: T ( ) Delete
Name: GAVILAN, MARENA
Address: 725 W 70 PLACE
City-St-Zip: HIALEAH, FL 33014

Title: S ( ) Delete
Name: SALCEDO, ZAIDA,
Address: 864 W 72 PL
City-St-Zip: HIALEAH, FL

Title: PD ( ) Delete
Name: SALCEDO, RUGERO,
Address: 864 W 72ND PLACE
City-St-Zip: HIALEAH, FL

Title: D ( ) Delete
Name: SALCEDO, ARTURO
Address: 19952 NW 79TH AVE
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete
Name: GIL, NELLY J
Address: 601 SW 57TH AVE STE H
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

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: RUGERO SALCEDO P 03/05/2009

Electronic Signature of Signing Officer or Director — Date