2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# 734648

Entity Name: OPEN BIBLE TEMPLE, INC.

Current Principal Place of Business:

5720 S.W. 17 ST.
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

5720 S.W. 17 ST.
MIAMI, FL 33155

New Mailing Address:

FEI Number: 59-1700104 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VERA, JOSE M.
5720 S.W. 17 ST.
MIAMI, FL 33155 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: D ( ) Delete
Name: HERNANDEZ, RENE
Address: 14631 SW 35 CT
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: VERA, MARIA L
Address: 5780 S.W. 17TH ST.
City-St-Zip: MIAMI, FL 00000,

Title: D ( ) Delete
Name: PITA, JOSE M
Address: 3649 SW 99 AVE #3
City-St-Zip: MIAMI, FL 33165

Title: PD ( ) Delete
Name: VERA, JOSE MANUEL
Address: 5780 SW 17 STREET
City-St-Zip: MIAMI, FL 00000,

Title: D ( ) Delete
Name: FERNANDEZ, MARIA E
Address: 9763 S.W. 37TH TERR.
City-St-Zip: MIAMI, FL

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: JOSE M VERA PD 04/23/2009

Electronic Signature of Signing Officer or Director — Date