## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736807** 

Apr 27, 2009 Secretary of State

Entity Name: IGLESIA VICTORIA ASAMBLEAS DE DIOS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1050 WEST 23RD STREET HIALEAH, FL 33010 **Current Mailing Address: New Mailing Address:** 1074 WEST 70TH PLACE 7431 WEST 29 WAY HIALEAH, FL 33014 HIALEAH, FL 33018 FEI Number: 65-0113240 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ANDERSON, ESTEBAN JR ANDERSON, ESTEBAN JR 169 EAST FLAGER STREET 12555 BISCAYNE BLVD 1232 MIAMI, FL 33131 US NORTH MIAMI, FL 33181 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: 04/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GUANCH, LILIA Name: Name: 125 EAST 17 ST Address: Address: City-St-Zip: HIALEAH, FL 33010 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: RAMIREZ, ELBA Name: Address: 7431 WEST 29TH WAY Address: City-St-Zip: HIALEAH, FL 33018 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GRANADO, DORINDA Name: GRANADO, DORINDA Name: 1050 WEST 23RD STREET 4955 N.W. 199 STREET, #240 Address: Address: City-St-Zip: HIALEAH, FL 33010 City-St-Zip: MIAMI, FL 33055 Title: ( ) Delete Title: (X) Change ( ) Addition Name: OLIVAS, ISABEL Name: OLIVAS, ISABEL 1050 WEST 23RD STREET 5060 WEST 12 LANE Address: Address: City-St-Zip: HIALEAH, FL 33010 City-St-Zip: HIALEAH, FL 33012 Title: Title: ( ) Delete (X) Change ( ) Addition RIVERO, ELOY F RIVERO, ELOY S Name: Name: 1074 WEST 70TH PLACE 5461 WEST 24 AVENUE, #29 Address: Address: City-St-Zip: HIALEAH, FL 33014 City-St-Zip: HIALEAH, FL 33016

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: ELBA RAMIREZ S 04/27/2009