## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT FILED

DOCUMENT# 737161 Aug 04, 2008
Secretary of State

Entity Name: TABERNACULO LA FE DE TAMPA, INC.

Current Principal Place of Business: New Principal Place of Business:

2816 N NEBRASKA AVE TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

PO BOX 76035 TAMPA, FL 33675

FEI Number: 59-2239274 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CABRERA, JUAN J
937 NINA ELIZABETH CIR.

BRANDON, FL 33510 US

CABRERA, JUAN J
5820 N CHURCH AVE.
460
TAMPA, FL 33614 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: 08/04/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete PIÑOL, JUAN Name: Name: 3519 N. 10TH STREET Address: Address: City-St-Zip: TAMPA, FL 33605 US City-St-Zip: Title: () Delete Title: () Change () Addition SAMANIEGO, ABEL Name: Name: Address: 2421 CAMDEN OAKS PL Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: Title: SD () Delete Title: () Change () Addition MEJIA, JOHN Name: Name: Address: 3418 W. LEMON ST. Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ROLON, LUIS
 Name:
 DE JESUS, JUAN

 Address:
 206 E. MORGAN ST.
 Address:
 10407 N PAWNEE AVE.

 City-St-Zip:
 BRANDON, FL 33510
 City-St-Zip:
 TAMPA, FL 33617

 Name:
 FERNANDEZ, BONNIE
 Name:

 Address:
 529 S. PARSONS AVE. # 103
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 DE JESUS, JUÁN
 Name:
 MARTINEZ, CÁRMEN

 Address:
 10407 N PAWNEE AVE.
 Address:
 3102 W PARIS ST.

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33614

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: ABEL SAMANIEGO TD 08/04/2008