

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # 741711 1. Entity Name PRIMERA IGLESIA ALIANZA HISPANA, INC.					
Principal Place of Business 415 E. 12TH ST. HIALEAH, FL 33010			Mailing Address 415 E. 12TH ST. HIALEAH, FL 33010		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2469280	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SOTOLONGO, JAVIER YOEL 7210 NW 174TH TERR #102 MIAMI, FL 33015				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution ☐		\$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 TO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO SOTOLONGO, JAVIER YOEL 7210 NW 174TH TERRACE #102 MIAMI, FL 33015	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVPO BORREGO, ISRAEL L 265 E. 17TH STREET HIALEAH, FL 33010	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CE GONZALEZ, GUSTAVO 10000 NW 80TH CT. # 2333 HIALEAH, FL 33018	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDE HERNANDEZ, CALES 1154 W. 35TH ST. #216 HIALEAH, FL 33012	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Javier Y Sotolongo</i>				03/05/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE	