

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744086

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** PRIMERA IGLESIA BAUTISTA LA HERMOSA, INC.

**Current Principal Place of Business:**

28140 SW 152ND AVENUE  
LEISURE CITY, FL 33033 US

**New Principal Place of Business:**

**Current Mailing Address:**

28140 SW 152ND AVENUE  
LEISURE CITY, FL 33033 US

**New Mailing Address:**

**FEI Number:** 59-2784678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GONZALEZ, ENRIQUE A  
20671 SW 87TH CT  
CUTLER BAY, FL 33189 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: P  
Name: LEZCANO, REDONEL  
Address: 12270 SW 185TH TERRACE  
City-St-Zip: MIAMI, FL 33177 US

Title: VP  
Name: GUEVARA, MARCOS T  
Address: 28530 SW 144TH AVENUE  
City-St-Zip: LEISURE CITY, FL 33033 US

Title: T  
Name: PEREZ, HUMBERTO R  
Address: 14940 SW 151TH TERRACE  
City-St-Zip: MIAMI, FL 33196 US

Title: VT  
Name: OCHOA, ANGEL A  
Address: 962 NE 29TH STREET  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: S  
Name: LEZCANO, ANA C  
Address: 12270 S.W. 185TH TERRACE  
City-St-Zip: MIAMI, FL 33177 US

I hereby 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 all other like empowered.

**SIGNATURE:** ENRIQUE A. GONZALEZ

RA

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date