## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 05, 2008 8:00 am Secretary of State **DOCUMENT # 748774** 03-05-2008 90035 036 \*\*\*\*61.25 IGLESIA CRISTIANA "JUAN WESLEY" METODISTA UNIDA, INC. Principal Place of Business Mailing Address 2150 SW 75 AVENUE 2150 SW 75 AVENUE **MIAMI FL 33155 MIAMI FL 33155** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2731349 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERNANDEZ, ISMAEL Street Address (P.O. Box Number is Not Acceptable) 6825 WEST FLAGLER ST. **MIAMI FL 33144** City Zip Code 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) CATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 GECRETARY. TITLE X Delete Change MAYDA M. MORA 1921SW. 82ND PLACE LOOS, ELSIO NAME 1950 SW 121 CT #245 STREET ADDRESS STREET ADDRESS MIAMI'FL 33175 CITY-ST-ZIP CITY-ST-ZIP MIAMI. FLA. 33165 TITLE ☐ Delete TITLE Change ☐ Addition QUINTERO, JOSE NAME NAME 9411 SW 7 LANE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZiP TITLE ĪD~ ☐ Detete TÎLE ☐ Change Addition NAME HERNANDEZ, ISMAEL MAME 6825 W FLAGLER ST STREET ADDRESS STREET ADDRESS **MIAMI FL 33164** CITY-ST-ZIP CITY-ST-ZIP TREASURER SD Delete TITLE TITLE Addition ARIAS, LUZ MIREYA NAME NAME JUAN SUROS 226 N.W.7 STREET#B211 STREET ADDRESS 1533 SW 129 CT STREET ADDRESS CITY-ST-ZIP MIAMI FL 33184 CITY - ST- ZIP TITLE ☐ Defete TITLE Change ☐ Addition VAZQUEZ, JOSE NAME 7343 SW 113 CIRCLE PLACE STREET ADDRESS STREET ADDRESS **MIAMI FL 33173** CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITUE Change ☐ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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. 2-25-09 3052643006 SIGNATURE: タ