


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 08:00 A
Secretary of State

DOCUMENT # 756166 1. Entity Name THE PENTECOSTAL REVIVAL CHURCH, INC.	
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Principal Place of Business 3107 CORDELIA STREET TAMPA, FL 33607	Mailing Address 3107 CORDELIA STREET TAMPA, FL 33607
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02162007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2064196	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RIOS, EMILIO
3107 CORDELIA STREET
TAMPA, FL 33607

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIOS, EMILIO 3107 CORDELIA ST TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIOS, ISABEL 3107 CORDELIA ST TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, SIXTA 3719 ARGON DRIVE TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIOS, ELIZABETH 3107 CORDELIA ST. TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, OBDULA 609 21ST AVENUE RUSKIN, FL 33570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, HECTOR 609 21ST AVE RUSKIN, FL

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U00000668560
03/27/07-80036-007 61.25

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: *Emilio Rios Pres.* **Emilio Rios Pres.** **3/12/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #