

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 20, 2006
Secretary of State**

DOCUMENT# 764354

Entity Name: BETESDA ASEMBLY OF GOD, INC.

Current Principal Place of Business:3300 N.W. 135TH STREET
MIAMI, FL 33054**New Principal Place of Business:**3300 N.W. 135TH STREET
OPA LOCKA, FL 33054**Current Mailing Address:**3300 N.W. 135TH STREET
MIAMI, FL 33054**New Mailing Address:**3300 N.W. 135TH STREET
OPA LOCKA, FL 33054

FEI Number: 59-2280575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BELLO, JOSE F.
7144 MIAMI LAKES DR #15
MIAMI LAKES, FL 33014 US**Name and Address of New Registered Agent:**BELLO, JOSE F.
7141 MIAMI LAKES DR # O-15
MIAMI LAKES, FL 33014 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: JOSE F. BELLO

09/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: BELLO, JOSE F.
Address: 7141 MIAMI LAKES DR #15
City-St-Zip: MIAMI LAKES, FL 33014Title: S (X) Delete
Name: DELGADO, NINISKA
Address: 620 SE 8TH STREET
City-St-Zip: HIALEAH, FL 33010Title: T (X) Delete
Name: O'NEIL, CELIDA
Address: 9160 NW B WOODASAN
City-St-Zip: MIAMI, FL 33147Title: VP (X) Delete
Name: CANOLES, EDGAR
Address: 10545 NW 21ST AVE
City-St-Zip: MIAMI, FL 33147Title: TR (X) Delete
Name: BOFFILL, JOANA
Address: 2371 NW 119TH ST APT 103
City-St-Zip: MIAMI, FL 33167Title: TR (X) Delete
Name: DELGADO, LUIS G
Address: 620 SE 8TH ST
City-St-Zip: HIALEAH, FL 33010**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: BELLO, JOSE F PRES
Address: 7141 MIAMI LAKES DR #O-15
City-St-Zip: MIAMI LAKES, FL 33014Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
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City-St-Zip:Title: () Change () Addition
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City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE F. BELLO

PRES

09/20/2006

Electronic Signature of Signing Officer or Director

Date